



STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
REAL ESTATE DIVISION

788 Fairview Drive, Suite 200 \* Carson City, NV 89701-5453 \* (775) 687-4280  
2501 East Sahara Avenue, Suite 102 \* Las Vegas, NV 89104-4137 \* (702) 486-4033  
e-mail: realest@govmail.state.nv.us http://www.state.nv.us/b&i/red/

APPLICATION FOR DUAL LICENSE  
PARTNERSHIP BROKER

Type: \_\_\_\_\_ License No. \_\_\_\_\_ Date: \_\_\_\_\_

Name: \_\_\_\_\_  
*Last First M.I.*  
Home Address: \_\_\_\_\_  
Birth Date: \_\_\_\_\_ Social Security No.: \_\_\_\_\_

**FEE: \$210.00**

**Documents Required:**

- 1. Certified copy of Partnership Agreement.
- 2. Copy of Business License, or receipt of payment.
- 3. Copy of Authorization to Inspect Records.
- 4. Proof of Nevada Industrial Insurance coverage.
- 5. Letter from Partnership acknowledging they are aware of licensee acting as Individual Broker.
- 6. Financial Statement - *Personal Financial Statement with Bank Verification. For each account, submit a verified statement letter from each banking institution. This financial statement cannot be approved without verification letters. You must provide the following on bank letterhead: Name of account, account number, length and specific dates of account – must have been on deposit for a minimum of 90 days prior to the date of application.*

Firm Name: \_\_\_\_\_

Address: \_\_\_\_\_

*No. & Street*

*Suite*

*P.O. Box No.*

*Telephone No.*

*City*

*State*

*Zip Code*

\_\_\_\_\_  
*Signature of Licensee*

**\*\*\* ALL TRANSACTIONS MUST BE PAID BY MONEY ORDER, CHECK OR EXACT CHANGE \*\*\***