



**STATE OF NEVADA  
DEPARTMENT OF BUSINESS AND INDUSTRY  
REAL ESTATE DIVISION**

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 e-mail: realest@govmail.state.nv.us <http://www.state.nv.us/b&i/red/>

**CONFIDENTIAL FINANCIAL STATEMENT**

Name _____	Social Security # _____
Address _____	Business Ph _____
_____	Residence Ph _____
Occupation _____	Employer _____
Employer's Address _____	
_____	
Spouse's Name _____	Social Security # _____
Address _____	Business Ph _____
_____	Residence Ph _____
Occupation _____	Employer _____
Employer's Address _____	

**ASSETS**

***ALL LIQUID ASSETS MUST BE ACCOMPANIED BY VERIFICATION***

Cash (other than amounts shown in banks) ..... \$ _____	Automobiles..... \$ _____
Cash in Banks (Schedule 1) ..... _____	Other investments (Schedule 3) ..... _____
Accounts Receivable (Schedule 2) ..... _____	Personal Property ..... _____
Notes Receivable (Schedule 2)..... _____	Net Worth of any Business Owned
Stocks and Bonds (Schedule 3) ..... _____	(Please include financial statement) ..... _____
Real Estate (Schedule 4) ..... _____	Other Assets ..... _____
Sub Total..... \$ _____	Sub Total .....\$ _____
	Total.....\$ _____

**LIABILITIES**

Notes Payable to Others (Schedule 7) ..... \$ _____	Loans Against Life Insurance (Schedule 6) _____
Installment Loans Payable (Schedule 7)..... _____	Other Liabilities ..... _____
Accounts Payable ..... _____	Liens on Real Estate (Schedule 5)..... _____
Taxes Payable ..... _____	Long Term Debts ..... _____
Sub Total..... \$ _____	Sub Total .....\$ _____
	Total.....\$ _____
	<b>Net Worth.....\$ _____</b>

Salary..... \$ _____	Taxes & Assessments..... \$ _____
Spouse's Salary ..... _____	Income Taxes..... _____
Dividends..... _____	Child Support/Alimony ..... _____
Interest..... _____	Mortgage Payments..... _____
Commissions..... _____	Contract Payments ..... _____
Rentals..... _____	Insurance..... _____
Other..... _____	Other..... _____
Total ..... \$ _____	Total.....\$ _____

## SCHEDULES

### Schedule 1. Cash in Banks & Savings and Loan & Checking Accounts\*\*

Bank Name	90 Day Average Balance	Account #	Balance

**Total** \$ \_\_\_\_\_

\*\* For each account, submit a verified statement letter from each banking institution, to include Name of Account, Current Balance, Account Number, Length and Specific Dates of Account. The accounts must have been open and on deposit for a minimum of ninety (90) days prior to the date of application. This financial statement cannot be approved without verification letters. NAC 645.150(2).

### Schedule 2 Receivables

Name of Debtor	Collateral	Payments	Maturity Date	Unpaid Balance

**Total** \$ \_\_\_\_\_

### Schedule 3. Stocks and Bonds

# of Shares	Description	Amount Carried on My Books	Present Market Value

**Total** \$ \_\_\_\_\_

### Schedule 4. Real Estate (If additional space is necessary, attach separate sheet)

Address or Legal Description	Type of Property	Monthly Income	Original Cost	Estimated Present Value

**Total** \$ \_\_\_\_\_

### Schedule 5. Mortgages of liens on Real Estate

Name of Creditor	Payments	Unpaid Balance

**Total** \$ \_\_\_\_\_

### Schedule 6. Costs of Maintaining Office

Rent..... \$ _____	Utilities .....\$ _____
Telephone..... _____	Clerical Help ..... _____
Other (Describe) ..... _____	
Sub Total ..... \$ _____	Sub Total.....\$ _____
	<b>Total</b> .....\$ _____

### Schedule 7. Notes Payable to Others

Name of Creditor	Address	Payments	Collateral	Unpaid Balance

**Total** \$ \_\_\_\_\_

I, by signing and filing this application, authorize any person or institution to which reference is made by me in connection with the application, to release or divulge to the Real Estate Division or its representative any information in the possession of such person or institution regarding me. I hereby approve any investigation on my credit background.

Signature \_\_\_\_\_ Date \_\_\_\_\_