

## STATE OF NEVADA

## Public Records Request Deliver/Mail to: Mine Safety & Training [1886]

College Prkwy. #120 Carson City, NV 89706

	Email: mines@dir.nv.gov]				
Date of Request					
Requestor Contact Information					
Name:					
Organization:					
Address:					
City, State, Z	ip:				
Phone:					
E-mail:					
	I				
Records Requested:					
Check one: Paper copies Electronic copies Certified copies Inspection (in person)					
Please be specific and include as much detail as possible regarding the records you are requesting.					
To complete an estimate, the agency will need the following information:					
☐ I will pick up ☐ Please FedEx ☐ Please send USPS ☐ E-mail (if format allows)					
I will pick up		Fed Ex billing number:	I lease send OSI S	L-man (n format anows)	
		1 ew 2w owning winner.			
Statement					
I understand there is a charge for copies of public records. I understand I will receive a written estimate for production of the					
records indicated above if the estimated cost is expected to be over \$25.00, which I will be required to pay in full prior to					
inspection or reproduction. Materials will be held for 30 days.					
Requester					
Signature		Signature			
Office Use Only					
Request status:			Estimate:		
-					
Date Request r		quest received		r.	
		•	Estimate:	\$	
		ceipt acknowledgement issued	Date deposit received	<u></u>	
		quest filled	Actual (if different):	\$	
		imated completion	Date final payment received		
Es		imate provided	Completed by		
Re		quest denied in whole			
		Retain request form for three (3) calendar y		ndar years from the end of the	
	Oti	ner:	calendar year in which the response v	was completed according to RDA	