

STATE OF NEVADA  
**MECHANICAL COMPLIANCE  
SECTION**



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**Request for an Approved Exemption  
In Accordance with (NAC 455C.116 or 455C.448)**

<b>Date Exemption Requested:</b>		<b>Requested by: (Name, Phone &amp; Email)</b>	
<b>Contractor, Installer or Owner of Equipment:</b>			
<b>Location Name:</b>			
<b>City:</b>		<b>State:</b>	<b>Zip:</b>
<b>Exemption from Requirement:</b>		<b>State Identification Number(s): NV</b>	

<b>Reason:</b>

<b>Conditions (Jurisdictional Use Only):</b>

<b>Approval:</b>	<b>Name/Signature:</b>	<b>Title:</b>	<b>Date:</b>
<input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Inspector</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Supervisor</b>	
<input type="checkbox"/> Yes <input type="checkbox"/> No		<b>Chief</b>	