



State of Nevada
FUNERAL AND CEMETERY SERVICES BOARD

3740 Lakeside Drive, Suite 201, Reno, Nevada, 89509
Phone (775) 825-5535 * Email nvfuneralboard@fb.nv.gov

Applicant Request to Release Information

1. I, _____ hereby authorize and request all persons to whom this request is presented, having information relating to or concerning me, including a criminal background investigation if necessary, to furnish such information to any duly appointed agent of the Nevada Funeral and Cemetery Services Board whether or not such information would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.
2. I hereby authorize and request all persons to whom this request is presented, having documents relating to or concerning me, to permit any duly appointed agent of the Nevada Board of Funeral and Cemetery Services to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.
3. I do, for myself, my heirs, executors, administrators, successors and assigns, hereby release, remise, and forever discharge the person to whom this request is presented, and his agents and employees from any and all manners of action, causes of action, suits, debts, judgments, executions, claims, and demands whatsoever, known or unknown, in law or equity, which I ever had, now have, may have, or claim to have against the person to whom this request is presented to his agents or employees arising out of or by reason of complying with this request.
4. I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees from and against all claims, damages, losses, and expenses, including reasonable attorney's fees arising out of or by reason of complying with this request.
5. A reproduction of this request shall be for all intents and purposes as valid as the original.

Signature of Applicant

Date

Print Name

SUBSCRIBED AND SWORN BEFORE ME

This _____ day of _____, in the year _____.

Notary Public

Seal