



Carson City Public Records

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Phone: 775-887-2217 Fax: 775-887-2146

Today's Date: _____

First Name: _____ Last Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Email: _____

Description of Record(s) Requested: Please provide a complete description of the record(s) requested. Include subjects, titles, dates, etc. Be very specific.

Date Range: _____ - _____

Submit your request to Public Records via the email address, mailing address, or fax number listed above.

*All requests for public records will be responded to no later than the fifth business day after the request is received, in accordance with the provisions of Chapter 239 of Nevada Revised Statutes. Please note that not all public documents are available in electronic format. If the record requested is not available electronically, we will make them available for inspection or by paper copy in accordance with the Nevada Public Records Act.