



Nevada Department of Taxation
Appraiser Transfer/Leave

Return this form to:
Division of Local Government Services
3850 Arrowhead Drive
Carson City, Nevada 89706

Please Print or Type:

1. APPRAISER INFORMATION

Name

County

2. REASON FOR LEAVING

☐ **Retired**

☐ **Transferred**

☐ **Other**

Last day of employment: _____

3. SIGNATURES

By my signature below, I verify the appraiser is no longer an appraiser of the sponsoring tax agency and information and date are true and correct.

► _____
Assessor or Representative Signature

Date

Phone Number

► _____
Administrative Assistant of Local Government Services Signature

Date

► _____
Deputy Director of Local Government Services Signature

Date