



Department of Administrative Services Code Enforcement Unit

4701 W. Russell Rd., Las Vegas, NV 89118

Email: PublicResponseinfo@ClarkCountyNV.gov

Office: 702-455-4191 | Fax: 702-455-2080 | ClarkCountyNV.gov

REQUEST FOR HEARING COUNTY OF CLARK - STATE OF NEVADA

Requestor's Name: _____ Phone: _____

Address: _____
(Street, City, State, Zip Code)

Please provide the following:

Case Number _____ or Address of Inquiry _____

Please check the appropriate box:

Administrative Citation Citation Date _____ Citation Amount \$ _____
The fine amount must be paid when submitting the Request for Hearing form in order for the hearing to be scheduled. You must pay by mail or in person at the Clark County Code Enforcement Administrative Office at 4701 W. Russell Rd, Las Vegas, NV 89118. Payment must be made by personal check, cashier's check, or money order made payable to Clark County Treasurer. Please write the citation number on the check or money order.

Parking Citation Citation Date _____ Citation Amount \$ _____
The fine amount must be paid when submitting the Request for Hearing from in order for the hearing to be scheduled. You must pay by mail or in person at the Clark County Code Enforcement Administrative Office at 4701 W. Russell Rd, Las Vegas, NV 89118. Payment must be made by personal check, cashier's check, or money order made payable to Clark County Treasurer. Please write the citation number on the check or money order.

Appeal a Notice

Please list the notice type

Online Payment Check or Money Order

Reason for Hearing:

SIGNATURE

DATE