



LVL EVICTIONS

PH: 702-628-8826, FX: 888-609-8561, TXT: 702-670-1081, EM: LVLEvictions@Gmail.com
MAIN OFFICE * Must Have An Appointment * 2840 S Jones Blvd, Ste-1, Las Vegas, NV 89146

NEW OWNER NOTICE FOLLOWING TRANSFER OR SALE REQUEST (\$50 / NOTICE)
**** NOTICE MUST BE SERVED WITHIN THIRTY (30) CALENDAR DAYS FROM DATE OF TRANSFER OR SALE ****
ONCE SUBMITTED, THIS NOTICE REQUEST, WILL BE SERVED ON THE FIRST (1ST) AVAILABLE SERVICE DAY

1. LANDLORD INFORMATION (from Lease) * Must provide copy of existing lease.

NAME _____ EMAIL _____ REQUEST DATE _____
STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____ PHONE _____

2.

RENTAL PROPERTY ADDRESS, CITY, STATE, ZIPCODE _____
** IF IN A GUARD GATED COMMUNITY, LAS VEGAS LANDLORD MUST BE ADDED TO ACCESS LIST.
ACCESS INFORMATION, INSTRUCTIONS, COMMENTS TO SERVER _____
 NOT GATED GUARD GATED COMMUNITY
 = _____
GATED GATE CODE

3. TENANT INFORMATION (from Lease)

NAME _____ PHONE _____ NAME _____ PHONE _____
NAME _____ PHONE _____ NAME _____ PHONE _____

4. COUNTY RECORDER INFORMATION (from documents recording new owner of property)

RECORDED DATE: _____ DOCUMENT# _____

5. DELIVER PAYMENTS TO (Amount? Deposit? Payable to Whom? Payment Type? {then Delivery to Address? < OR > Bank Deposit?})

\$ _____ \$ _____
RENT (EXISTING) DEPOSIT (EXISTING) NAME TO MAKE PAYMENT PAYABLE TO _____
PAYMENT TYPES: CASH CHECK MONEY ORDER ONLINE PAYMENTS

OR
ADDRESS (MAIL PAYMENT TO) _____ BANK NAME (DEPOSIT PAYMENT TO) _____
CITY, STATE, ZIP CODE (MAIL PAYMENT TO) _____ ROUTING NUMBER (DEPOSIT PAYMENT TO) _____
PHONE _____ ALT PHONE _____ ACCOUNT NUMBER (DEPOSIT PAYMENT TO) _____

** Notice MUST be served WITHIN thirty (30) calendar days FROM the date of transfer or sale. **

AUTHORIZATION: * CLIENT MUST PROVIDE/SEND A COPY OF HIS/HER DRIVERS LICENSE OR ID WITH THIS FORM. CLIENT AUTHORIZES, BY SUBMITTAL OF THIS FORM (HAND DELIVERY, FAX, EMAIL, ETC.), FOR LVL TO PERFORM THE SERVICES INDICATED ABOVE. IF SIGNATURE IS MISSING ON FORM BELOW, THEN DATE OF EMAIL, FAX, HAND DELIVERY, ETC. SHALL BE DEEMED AS THE DATE OF AUTHORIZATION. ALL NOTICE REQUESTS SUBMITTED WILL BE SERVED ON THE FIRST (1st) AVAILABLE JUDICIAL DAY, NO NOTICES SERVED ON WEEKENDS OR HOLIDAYS. LVL IS NOT RESPONSIBLE FOR ANY WRONG, MISSING, UNREADABLE INFORMATION PROVIDED REGARDLESS OF LANGUAGE, INTERPRETATION OR UNDERSTANDING NOR ANY COURT DECISIONS OR DENIALS. ONCE NOTICE SERVED, ANY CHANGES TO NOTICE WILL REQUIRE A NEW NOTICE AT AN ADDITIONAL COST. LVL IS NOT AN ATTORNEY, LAW FIRM, LAW ENFORCEMENT, JUDGE OR ANY OTHER GOVERNMENT OFFICIAL. CLIENT IS ADVISED TO CONSULT AN ATTORNEY IF NEEDED. CLIENT SHALL HOLD LVL HARMLESS FROM ANY NOTICE AND LEGAL ISSUES. CLIENT (COMPANIES, OWNERS, PMs, AGENTS, ETC.) AGREE TO PAY ALL FEES WHEN THEY BECOME DUE. FEES ARE NONREFUNDABLE AND NONTRANSFERABLE. A 5% SERVICE FEE WILL BE CHARGED FOR ALL CREDIT AND DEBIT CARD PAYMENTS.

BY SIGNING, I AUTHORIZE LVL TO PERFORM THE SERVICES INDICATED ABOVE. SIGN: x _____ DATE _____
SIGNATURE DATE

**** HOW ARE YOU PAYING FOR THIS SERVICE?** Cash, Check, Money Order = **in person delivery.** Zelle = online (www.zellepay.com).
 Credit/Debit Card below (Non-MEAA) Credit/Debit Card on file (MEAA). Account Deposit (**deduct from my account deposit**).
Name on Card: _____ Phone: _____
Billing Zip Code: _____ Email: _____
Card #: _____ Amex[3] Visa[4] MC[5] Discover[6]
Expiration: (mm / yy) _____ CVV Code: _____ (Amex = Front. Visa/MC/Discover = Back)

BY SIGNING, I AUTHORIZE LVL TO CHARGE MY CREDIT OR DEBIT CARD INDICATED HERE FOR ANY BALANCE DUE. SIGN: x _____ DATE _____
CARD HOLDER'S SIGNATURE DATE

1) PRINT, FILL IN, SIGN and DATE. 2) COLOR COPY OF YOUR DL. 3) MAIL, DROP OFF, EMAIL or FAX to LVL