

Nevada State Board of Dental Examiners

2651 N Green Valley Parkway Suite 104, Henderson, NV 89014 (702) 486-7044 • (800) DDS-EXAM • Fax (702) 486-7046

PUBLIC RECORDS LIST OF LICENSEES REQUEST FORM

Name of Person Requesting: Contact Telephone Number: () Email Address::	Payment Method:
	Exp. Date: Security Code: Amt: \$
List of All Licensees: [Dentists/ Dental Specialists/ Dental Hygienists] \$8.00 Contains all public information currently on file: name of licensee, contact information (address and telephone number), license information, education, and disciplinary information. List of Anesthesia Permit Holders: All Permit Types Contains names of licensees that currently hold a General Anesthesia Administrator Permit/ Moderate Sedation Administrator Permit/Pediatric Moderate Sedation Administrator Permit/Site Permit ALL LISTS RETURNED BY EMAIL in EXCEL FORMAT	
Purchasers Signature:	Date:
FOR OFFICE USE ONLY: Requiest Pessive Date: DATE STAND Acknowled	adgement Letter Sent: / /20 Cent But Chaff Intaining
	Date CD-ROM Mailed://20 Sent By: Staff Initials Sent By: Staff Initials Sent By: Staff Initials