**JUSTICE COURT, TOWNSHIP OF** _____
**CLARK COUNTY, NEVADA**

Owner's Name: _____

Business Name: _____

Agent's Name: _____

Address: _____

City, State, Zip: _____

Phone: _____

E-Mail: _____

Landlord,

vs.

Tenant's Name: _____

Tenant.

Case No.: _____

Dept. No.: _____

**LANDLORD'S AFFIDAVIT/COMPLAINT FOR SUMMARY EVICTION**

☐ Nuisance/Waste/Assigning/Subletting/ Unlawful Business/Controlled Substance Violation

☐ Perform Lease Condition

☐ Tenancy-At-Will

☐ No Cause

Landlord or Landlord's authorized agent states as follows pursuant to NRS 40.254:

1. I am the *(check one box)* ☐ owner or ☐ owner's agent of the rental premises located at *(insert rental's address, including city, state, zip)* _____.

2. The tenancy started on *(insert date)*_____ .

3. The tenancy is a *(check one box)* ☐ periodic month-to-month ☐ periodic week-to-week

☐ fixed-term with the tenancy ending on *(insert date tenancy ends)* _____

☐ tenancy-at-will or ☐ other *(describe)* _____.

4. Tenant has not complied with the terms of the rental agreement or with the obligations of tenants set forth in Chapter 118A of the NRS as follows *(describe tenant's violation)*:

_____

_____

5. Tenant was served with a written notice to quit on *(insert date notice served)* _____ in compliance with NRS 40.280, and a copy of that notice is attached or submitted with this complaint.

6. I examined the rental property on *(insert date you examined the property)* _____ and Tenant remained in possession. In addition, if Tenant was served with a Five-Day Notice to Perform Lease Condition or Quit, Tenant did not perform that lease condition as of the date of my examination.

7. I ☐ do not ☐ do request to mediate this issue. *(Answer the following questions even if you are not requesting mediation.)*

8. If sent to mediation, I prefer *(check one box)* ☐ an in-person mediation ☐ a telephonic mediation ☐ a video-conference mediation.

9. The following individual has the authority to settle the case and would participate in mediation if mediation proceeds: *(check all that apply)* ☐ myself ☐ other individual with authority: *(write the names of all the individuals with authority who plan to be at the mediation)*

_____.

10. The mediator may contact me/the individual with settlement authority at the following.

Phone number: *(insert the best phone number for the mediator to make contact)*

_____-_____-_____

Email: *(insert the best email for the mediator to make contact)*

_____

Mailing Address: *(insert best mailing address for mediator to make contact)*

(Street Address): _____

(City, State, Zip): _____

11. Tenant ☐ is *not* ☐ is in default of rent. *(If tenant is not in default, move on to signature line of the form.)*

   a. ☐ I am moving for an exemption from a stay of this case due to a realistic threat of foreclosure. The following facts demonstrate that I am facing a realistic threat that the rental property will be foreclosed upon unless I am able to evict the tenant *(describe what facts that show threat of foreclosure)*:

_____

_____

   b. ☐ I am moving to rebut Tenant's affirmative defense regarding a pending rental assistance application based on the following facts: *(describe what facts support your rebuttal to the affirmative defense)*:

_____

_____

12. Tenant *(check one box)* ☐ did *not* sign a written rental agreement, or ☐ did sign a written rental agreement, and a copy of that agreement is attached or submitted with this complaint.

13. Tenant's rent *(check one box)* ☐ is *not*, or ☐ is subsidized by a public housing authority or governmental agency, and a copy of the Housing Assistance Payment Contract (or "HAP") is attached or submitted with this complaint and I have provided Southern Nevada Regional Housing Authority with a copy of the eviction notice pursuant to 24 C.F.R. § 982.310(e)(2)(ii).

THEREFORE, Landlord asks the Court to enter an Order for Summary Eviction of Tenant.

I declare under penalty of perjury under the laws of the State of Nevada that the foregoing is true and correct.

_____      _____      _____
*(Date)*                                        *(Print your name)*                              *(Sign your name)*