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IN THE JUSTICE COURT OF SPARKS TOWNSHIP COUNTY OF WASHOE, STATE OF NEVADA Landlord Name: ______ Case No.: ______ Agent Name:

	Buildioid i tuille.	_ Casc No
5	Agent Name:	Dept. No.:
6	Street Address:	-
	City, State, Zip:	LANDLORD'S AFFIDAVIT/COMPLAINT
7	Telephone:	FOR SUMMARY EVICTION
8	Email Address:	Nuisance/Waste/Assigning/Subletting/
9	Landlord,	Unlawful Business/Controlled Substance
10	V.	Violation Perform Lease Condition
11	Tenant Name(s):	Tenancy-At-Will
	Tenant.	☐ No Cause
12		
13	Landlord, or Landlord's authorized agent, pursuant t	to NRS 40.254 states as follows:
14	1. I am the (check one box) owner owner's age	nt of the rental premises located at (insert complete
15	address, including city, state, and zip code):	
16		
17	2. The tenancy started on (insert date):	•
18	3. The tenancy is a periodic month-to-month, [periodic week-to-week, fixed-term with
19	the tenancy ending on (insert date tenancy ends):	, tenancy-at-will or
20	other (describe)	
21	4. Tenant (check one box) did did not sign a wi	ritten rental agreement, and if so, a copy of that
22	agreement is attached to this Complaint.	
23	5. Tenant has not complied with the terms of the ren	ital agreement or with the obligations of tenants
24	set forth in Chapter 118A of the NRS as follows (describe	e tenant's violation):
25		
26		
27		
28		check box if additional sheets are attached.

1	6. Tenant was served with a written notice to quit on (insert date notice		
2	served): in compliance with NRS 40.280, and a copy of that notice and proof of		
3	service is submitted with this Complaint.		
4	7. Tenant was served with a five-day unlawful detainer notice on (insert date notice served):		
5	in compliance with NRS 40.280, and a copy of that notice and proof of service		
6	is submitted with this Complaint.		
7	8. On (insert date you last checked the rental premises):, I examined		
8	the rental premises and verified the tenant is in continued possession of the rental premises. In		
9	addition, if tenant was served with a Five-Day Notice to Perform Lease Condition or Quit, tenant did		
10	not perform that lease condition as of the date of my examination.		
11	9. Tenant's rent (check one box) is is not subsidized by a public housing authority or		
12	governmental agency, and a copy of the Housing Assistance Payment Contract (or "HAP") is		
13	attached or submitted with this Complaint and I have provided the Reno Housing Authority with a		
14	copy of the eviction notice pursuant to 24 C.F.R. § 982.310(e)(2)(ii).		
15	Therefore, I ask that the Court enter an Order for Summary Eviction of tenant.		
16	I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true		
17	and correct.		
18	Dated:		
19			
20	Signature:		
21	Print name:		
22	Address:		
23	City, State, Zip:		
24			
25	Telephone:		
26	Email Address:		
27			

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