

Records, Communications and Compliance Division 333 West Nye Lane #100 Carson City, Nevada 89706 Telephone (775) 684-6262 ~ Fax (775) 687-3232 www.rccd.nv.gov

## **E-Check Payment Processing Request**

Unless otherwise noted all fields are required.
Incomplete forms will result in a delay to processing your payment.
Payment can be called into the Fiscal office at (775) 684-6237 or (775) 687-0172 or faxed to (775) 687-3232. THIS INFORMATION CANNOT BE EMAILED.

Company Name:						
Account Number:		Brady	□CNC	□Civil	Applicant	
Payment Submitted by (First Name Last Name	e):					
Billing Address: City, State, Zip						
Telephone Number:	Ext	Fax Num	ber:			
E-mail Address:						
Physical Address: City, State, Zip  □Same as Billing						
Payment Details  Payment Date is always the current date an E-check takes approximately 3 busines  Payment Amount:	ess days.		lvised a	ctual pi	rocessing of	
Reference (optional):						
Name on Account:						
Account Number:	A	account Typ	e: □Che	ecking	□Savings	
Routing Number:						
**Any payment on account returned for	r Non-Sufficient	Funds will	be assess	ed a \$2	5.00 fee.**	
Signature (required if form completed by the Account Holder)	Printed Name			Date		
For DPS - Records, Communic	cations and Con	npliance Di	vision U	se ONL	Υ	
Statement Balance:		Explained to Account Holder there				
All information verified by:	Date	is a 3 day processing time prior to the				