

CONSENT TO RELEASE OF PERSONAL/CONFIDENTIAL INFORMATION

Anticipated Date of Mediation: _____

Name of Mediator: _____

Eviction Case Number: _____

I, _____, hereby authorize _____, or its employees or agents, to disclose to the above-named Mediator, in connection with the mediation of the above-referenced summary eviction case, any and all information, confidential or otherwise, which that entity may have regarding me as fully as though the information were being disclosed to me.

Date: _____

Signature: _____
(Person authorizing disclosure)

Notice: Due to COVID-19 eviction mediation attempts allow for electronic signatures pursuant to Nevada Supreme Court *Temporary Residential Summary Eviction Mediation Rules* Section 7(3)(e).