

LIMITED JURISDICTION CIVIL COURT COVER SHEET

Pahrump Township, Nye County, Nevada

Case No. _____
(Assigned by Clerk's office)

I. Party Information *(provide both home and mailing addresses if different)*

Plaintiff(s) (name/address/phone):	Defendant(s) (name/address/phone):
Attorney (name/address/phone):	Attorney (name/address/phone):

I. Nature of Controversy *(please select the one most applicable filing type below)*

Civil Case Filing Types

Real Property	Torts	Protection Orders
<p>Real Property</p> <input type="checkbox"/> Landlord/Tenant (Summary Eviction) <input type="checkbox"/> Unlawful Detainer Complaint (Writs of Restitution) <input type="checkbox"/> Other Real Property	<p>Negligence</p> <input type="checkbox"/> Auto <input type="checkbox"/> Premises Liability <input type="checkbox"/> Other Negligence <p>Other Torts</p> <input type="checkbox"/> Intentional Misconduct <input type="checkbox"/> Other Torts	<p>Protection Order</p> <input type="checkbox"/> Request for Domestic Violence Protective Order <input type="checkbox"/> Request for Protection Order (Non-Domestic Violence) <input type="checkbox"/> Sexual Assault Related <p>Protection Order-Extension Request</p> <input type="checkbox"/> Request for Extended Domestic Violence Protective Order <input type="checkbox"/> Request for Extended Protective Order (Non-Domestic Violence)
<p style="text-align: center;">Contract Case</p> <p>Seller Plaintiff (Debt Collection)</p> <input type="checkbox"/> Credit Card Collection <input type="checkbox"/> Payday Loan Collection <input type="checkbox"/> Debt Collection Agency <input type="checkbox"/> Other Debt Collection <p>Other Contract Case</p> <input type="checkbox"/> Contract Buyer Plaintiff <input type="checkbox"/> Other Contract Case	<p style="text-align: center;">Other Civil Filings</p> <p>Other Civil Filing</p> <input type="checkbox"/> Contested Liens Case <input type="checkbox"/> Order to Seal Records <input type="checkbox"/> Other Civil Matters <hr/> <p style="text-align: center;">Small Claims</p> <p>Small Claims</p> <input type="checkbox"/> Small Claims	

_____ Date

_____ Signature of initiating party or representative