

JUSTICE COURT, HENDERSON TOWNSHIP
CLARK COUNTY, NEVADA

Name: _____

Address: _____

PLAINTIFF/LANDLORD,

VS

Name: _____

Address: _____

Phone: _____

Email: _____

DEFENDANT/TENANT(S).

CASE NO. _____

DEPT. NO. _____

**TENANTS AFFIDAVIT IN
OPPOSITION TO SUMMARY
EVICTION REGARDING
NONPAYMENT OF RENT**

I have been served with a Seven Day Notice and request a hearing for the following reason: *PLEASE CHECK THE APPROPRIATE REASON.*

I am not in default of the rent. Rent paid on: _____.

I attempted to pay the rent on _____ in the sum of _____ and it was refused.

I have been locked out of the premises and the landlord is holding my property in lieu of rent.

If this box is checked, a brief explanation is required.

I gave Landlord written notice describing Landlord's failure to maintain my rental unit in a habitable condition. Landlord did not fix, or make reasonable effort to fix, the habitability problem within 14 days after my notice. So I am withholding my rent and depositing it with the court. **(To raise this defense you must deposit your rent with the court. NRS 118A.355)**

Other: _____

Tenant, appearing in proper person, contests this matter pursuant to NRS 40.253 and states as follows:

1. I am the tenant of the rental unit located at *(insert complete address of rental unit, including city, state and zip):* _____

2. My rent (check one box) is/ is not subsidized by a public housing authority or government agency.

3. I do not do request to mediate the issue. This request is only for residential tenants. *(Answer the following questions if you request mediation.)*

a. *I prefer (check one box)* an in-person mediation a telephonic mediation a video conference mediation.

b. The following tenants would participate in the mediation: (Check all that apply) myself other tenant(s) named: *(write the names of all the tenants who plan to be at the mediations)* _____

c. A mediator may contact me/the tenants at the following:

a. Phone number: *(insert the best phone number for the mediator to reach participants)* _____

b. Email: *(insert the best email for the mediator to reach participants)* _____

c. Address: rental property address other *(insert another address for the mediator to mail to):* _____

d. I require an interpreter in the following language: Spanish Other *(name language)* _____

e. I have not previously entered into a repayment plan with my landlord to pay back owned rent.

4. I have not have applied for rental assistance through _____

(name the entity where you applied) _____

and that application was approved was denied is pending

I **DECLARE UNDER PENALTY OF PERJURY** under the law of the State of Nevada that the foregoing is true and correct.

(SIGNATURE UNDER PENALTY OF PERJURY)

EXECUTED ON (Date)

FOR COURT USE ONLY

NOTICE OF HEARING

THIS MATTER IS SET FOR THE _____ DAY OF _____, 20____ AT _____ M.

IN DEPARTMENT NO: _____ LOCATED AT **243 WATER STREET, HENDERSON, NEVADA 89015 (702) 455-7951**

DATE: _____ CLERK'S INITIALS: _____

- ☐ Copy of Affidavit/Notice of Hearing given to Plaintiff/Landlord (at the counter).
- ☐ Copy of Affidavit/Notice of Hearing mailed to Plaintiff/Landlord.
- ☐ Copy of Affidavit/Notice of Hearing mailed to Defendant/Tenant(s).
- ☐ Landlord notified by telephone of hearing date/time.
- ☐ Tenant(s) notified by telephone of hearing date/time.

NRS 40.253 requires a copy of the Tenant's Affidavit be provided to the Landlord or Agent to avoid non-admittance to the premises.

PROPER ATTIRE IS REQUIRED. NO TANK TOPS, HALTER TOPS, OR SHORTS ARE ALLOWED IN THE COURTROOM.