

Pahrump Office  
Marilynn Gallivan Complex  
1981 E. Calvada Blvd. North  
Suite 120  
Pahrump, NV 89048  
Phone: (775) 751-7095  
Fax: (775) 751-4284



**Health and Human Services**  
**Director - Karyn Smith**

Tonopah Office  
Nye County Courthouse  
101 Radar Road  
Post Office Box 926  
Tonopah, NV 89049  
Phone: (775) 482-8125  
Fax: (775) 482-7261

I.D.#: \_\_\_\_\_

**UTILITY SECURITY DEPOSIT**  
**\*\*TO BE COMPLETED BY UTILITY COMPANY\*\***

Date: \_\_\_\_\_

**Client's name and address:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Nye County Health & Human Services is considering payment of the security deposit for the above named client for utilities.

Please indicate which utility: \_\_\_\_\_. (Electric, Propane or Water)

The amount of the security deposit is: \_\_\_\_\_.

**Please make a check payable to:** Name/Agency/Company: \_\_\_\_\_  
Social Security or Taxpayer ID #: \_\_\_\_\_  
Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
Telephone #: \_\_\_\_\_

Is this monthly utility cost included in the rent charge and payable to the landlord? ☐ YES ☐ NO

**I understand that approval of utility deposit assistance does not guarantee payment of full amount due, and this form is NOT a guarantee of approval for utility deposit assistance. It is my understanding that I will receive a letter from Nye County Health & Human Services indicating approval or denial of assistance, and that it may take up to 4 weeks before I receive a payment, if assistance is approved. If at any time the utility deposit (or portion thereof) paid on the client's behalf will be refunded, it shall be reimbursed first to Nye County, payable to Nye County.**

\_\_\_\_\_  
Utility Company Signature

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Email Address