

**LOCAL GOVERNMENT BILL DRAFT REQUEST
FOR THE
2009 LEGISLATIVE SESSION**

Required Information

Name of Local Government:

Person to be consulted if more information is needed:

Name:

Title:

Mailing Address:

Phone Number:

E-mail Address:

Person to whom a copy of the completed draft should be mailed for review:

Name:

Title:

Mailing Address:

Phone Number:

E-mail Address:

Person to be contacted to provide testimony regarding the measure during the legislative session:

Name:

Title:

Mailing Address:

Phone Number:

E-mail Address:

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Request:

Describe the problem to be solved or the goal(s) of the proposed measure, or both:

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Effective Date:

The proposed measure, if enacted, will become effective on October 1, 2009, unless one of the following dates is specified:

Passage and Approval

July 1, 2009

January 1, 2010

Other

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Fiscal Notes:

State:

Would this measure, if enacted, create or increase any fiscal liability of state government or decrease any revenue of state government which appears to be in excess of \$2,000?

Yes

No

Unknown

Would this measure, if enacted, increase or newly provide for a term of imprisonment in the state prison or make release on parole or probation from the state prison less likely?

Yes

No

Unknown

Local:

Would this measure, if enacted, reduce revenues or increase expenditures of a local government?

Yes

No

Unknown

Would this measure, if enacted, increase or newly provide for a term of imprisonment in county or city jail or detention facility or make release on probation therefrom less likely?

Yes

No

Unknown

Unfunded Mandate:

Would this measure, if enacted, have the effect of requiring one or more local governments to establish, provide or increase a program or service which is estimated to cost more than \$5,000 per local government and a specified source for the additional revenue to pay the expense is not authorized by this measure or another specific statute?

Yes

No

Unknown

I hereby certify that this request for the drafting of a legislative measure was approved by the

_____ at a public hearing on _____.
(Governing body of the county, school district or city) (Date of hearing)

Signature of Person Submitting Request: _____

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Optional Information
(Use continuation sheet if necessary.)

Suggested Language or Proposed Solution to Problem:

Special Instructions (e.g., disfavored wording):

NRS Title, Chapter and Sections, Nevada Constitutional Provisions, Administrative Regulations (NAC) Affected:

Federal Law/Court Cases/Attorney General Opinions Involved:

Similar Measures from Current or Previous Sessions:

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Similar Statutes in Other States:

Related Newspaper or Periodical Articles:

Copies of supporting information may be attached.

Please Note: Pursuant to Senate Bill No. 490 (2007), subsection 6 of NRS 218.2413 now provides that all legislative measures requested by the governing body of a county, school district or city must be prefiled on or before December 15 preceding the regular legislative session. A measure that is not prefiled on or before that date is deemed by statute to be withdrawn. There is no authority for anyone to waive this provision.

Please submit completed Bill Draft Request form by mail to: Brenda Erdoes, Legislative Counsel, Legislative Building, 401 South Carson Street, Carson City, Nevada 89701, by e-mail at erdoes@lcb.state.nv.us or by fax at (775) 684-6761.