



New Public Agency Form

Public Agency

Agency Name _____

Address _____

City, State, Zip _____

Contact Name _____

Phone _____

Email _____

TAX ID _____

Bank or Credit Union

Bank Name _____

Address _____

City, State, Zip _____

Contact Name _____

Phone _____

Email _____

Account Number	Acct Type*	Account Name

* Report all Time and Demand Deposits, including savings accounts, money market accounts, negotiable order or withdrawal (NOW) accounts, and certificates of deposit. Please attach additional sheets if necessary.

Authorized Name (Public Agency)

Authorized Signature (Public Agency)

Date

Please complete this form and email to:
 Email pooledcollateral@nevadatreasurer.gov
 Questions? Call (775) 684-5764 or (775) 684-7101