

1. Name of Agency _____



1135 M Street Suite 220 Lincoln, NE 68508 | Office: 402.471.7810 | Fax: 402.471.7817

Application for Premium Access to UCC & EFS Records, Corporation Information, DOR and Sales Tax Permits

Please complete the following information to apply for access to Nebraska.gov premium service for no fee, and return to the address below.

Nebraska State Records Board C/O Secretary of State State Capitol, Suite 2300 Lincoln, NE 68509 Fax: 402.471.3237

2.	Premium services the agency is requesting access to:				
	Uniform Commercial Code and Effective Finance Statement Lien Records				
	Corporate Information				
	Department of Revenue and Sales Tax Permits Issued				
3.	Reason access is requested:				
4	. Projected Volume (number of times information will be accessed in one month)				
	5. Estimated number of users:				
	6. Names of users:				
o. Names of users.					
	Users	User Name	Email Address		
	1				
	2				
	3				
	4				
	5				





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1	hereby apply for access, at no cha	rge, to the records described above.
	Dated this day	, of, 20
Signature of Agency Director		Printed Name of Agency Director
STATE RECORDS BOARD USE ON The above request is hereby:	LY Approved	d
	C	Robert B. Evnen, Secretary of State hairman, Nebraska State Records Board

Please Note:

1. Any denial of this application will be reviewed by the Nebraska State Records

Board at their next regularly scheduled meeting upon the written request of the applying agency.

- 2. Agency activity reports may be provided to the State Records Board on a monthly basis.
- 3. Upon approval, this application will be forwarded to Nebraska.gov. Their representative will contact the agency designated contact person to set up your account.

