

STATE OF NEVADA

VENDOR REGISTRATION



Mail or fax to:
STATE PURCHASING
 515 E MUSSER ST STE 300
 CARSON CITY NV 89701
 PHONE: 775/684-0187
 FAX: 775/684-0188

All sections are mandatory and require completion. **IRS Form W-9 will not be accepted in lieu of this form.**

1. NAME For proprietorship, provide proprietor's name in first box and DBA in second box.

Legal Business Name, Proprietor's Name or Individual's Name	Doing Business As (DBA)
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2. ADDRESS/CONTACT INFORMATION

Address A – Physical address of <input type="checkbox"/> Company Headquarters <input type="checkbox"/> Individual's Residence Is this a US Post Office deliverable address? <input type="checkbox"/> Yes <input type="checkbox"/> No			Address B <input type="checkbox"/> Additional Remittance – PO Box, Lockbox or another physical location.		
Address			Address		
Address			Address		
City	State	Zip Code	City	State	Zip Code
E-mail Address			E-mail Address		
Phone Number	Fax Number		Phone Number	Fax Number	
Primary Contact			Primary Contact		

3. ORGANIZATION TYPE AND TAX IDENTIFICATION NUMBER (TIN) Check only **one** organization type and supply the applicable Social Security Number (SSN) or Employee Identification Number (EIN). **For proprietorship, provide SSN or EIN, not both.**

<input type="checkbox"/> Individual (SSN) <input type="checkbox"/> Sole Proprietorship (SSN or EIN) <input type="checkbox"/> Partnership (EIN) <input type="checkbox"/> Corporation (EIN) <input type="checkbox"/> Government (EIN) <input type="checkbox"/> Tax Exempt/Nonprofit (EIN) <input type="checkbox"/> Trust/estate (SSN or EIN)	<input type="checkbox"/> LLC tax classification: <input type="checkbox"/> Disregarded Entity <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	SSN
		Name associated with SSN:
		EIN
New TIN? <input type="checkbox"/> No <input type="checkbox"/> Yes – Provide previous TIN & effective date.		Previous TIN: _____ Date: _____

OTHER INFORMATION Check all that apply.

<input type="checkbox"/> Doctor or Medical Facility	<input type="checkbox"/> In-State (Nevada)	<input type="checkbox"/> Nevada Business License Number:
<input type="checkbox"/> Attorney or Legal Facility	<input type="checkbox"/> DBE Certificate #:	

4. ELECTRONIC FUNDS TRANSFER *Per NRS 227, payment to all payees of the State of Nevada will be electronic.*

Complete the following information **AND** provide a copy of a voided imprinted check for the account. If there are no checks for the account, restate the bank information on company letterhead. Individuals may provide a signed letter. **A deposit slip will not be accepted.** For a savings account, provide a signed letter with the bank information. Information on this form and the support documentation **must match**. Allow 10 working days for activation.

The information is for address <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> Both		
Bank Name	Bank Account Type <input type="checkbox"/> Checking <input type="checkbox"/> Savings	Provide an e-mail address for receiving Direct Deposit Remittance Advices.
Transit Routing Number	Bank Account Number	

Do not have a bank account.

5. IRS FORM W-9 CERTIFICATION AND SIGNATURE

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), **and**
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, **and**
- I am a U.S. citizen or other U.S. person (as defined by IRS Form W-9 rev January 2011).

Cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature	Print Name & Title of Person Signing Form	Date
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FOR STATE CONTROLLER'S OFFICE USE ONLY		Name of State agency contact & phone number:	
Primary 1099 Vendor <input type="checkbox"/>	1099 Indicator <input type="checkbox"/> Yes <input type="checkbox"/> No		
Entered By	Date	Comments	

Registration Instructions

General Instructions:

1. The substitute IRS Form W-9 is for the use of United States entities only. Non-US entities must submit an IRS Form W-8.
2. Type or legibly print all information except for signature.
3. All sections are mandatory and require completion.

Specific Information:

1. NAME

- a. Partnership, Corporation, Government or Nonprofit – Enter legal business name as registered with the Internal Revenue Service (IRS) in first box. If the company operates under another name, provide it in the second box.
- b. Proprietorship – Enter the proprietor's name in the first box and the business name (DBA) in the second box.
- c. Individual – Name must be as registered with the Social Security Administration (SSA) for the Social Security number (SSN) listed in Section 3.

2. ADDRESS/CONTACT INFORMATION

- a. Address A – *If the address is non-deliverable by the United States Postal Service, complete both Address A and B sections.*
Company – Provide physical location of company headquarters.
Individual – Provide physical location of residence.
E-mail – Provide complete e-mail address when available.
Telephone Number – Include area code.
Fax Number – Include area code.
Primary Contact – Person (and phone number or extension) to be contacted for payment-related questions or issues.
- b. Address B – Provide additional remittance address and related information when appropriate.

3. ORGANIZATION TYPE AND TAX IDENTIFICATION NUMBER (TIN)

- a. Individual – A person that has no association with a business.
- b. Proprietorship – A business owned by one person.
- c. Partnership – A business with more than one owner and not a corporation.
- d. Corporation – A business that may have many owners with each owner liable only for the amount of his investment in the business.
- e. LLC – Limited Liability Company. **Must mark appropriate classification – disregarded entity, partnership or corporation.**
- f. Government – The federal government, a state or local government, or instrumentality, agency, or subdivision thereof.
- g. Tax Exempt/Nonprofit – Organization exempt from federal income tax under section 501(a) or 501(c)(3) of the Internal Revenue Code.
- h. Doctor or Medical Facility – Person or facility related to practice of medicine.
- i. Attorney or Legal Facility – Person or facility related to practice of law.
- j. In-state – Nevada entity.
- k. Disadvantaged Business Enterprise (DBE) – A small business enterprise that is at least 51% owned and controlled by one or more socially and economically disadvantaged individuals. **Provide certification number.** See <http://www.nevadadb.com> for certification information.
- l. Nevada Business License number – Current NV business license number which was issued by the NV Secretary of State.
- m. The Taxpayer Identification Number (TIN) is always a 9-digit number. It will be a Social Security Number (SSN) assigned to an individual by the SSA or an Employer Identification Number (EIN) assigned to a business or other entity by the IRS.
Per the IRS, use the owner's social security number for a proprietorship.

4. ELECTRONIC FUNDS TRANSFER

Per NRS 227, payment to all payees of the State of Nevada will be electronic. Provide a copy of a voided imprinted check or restate bank information on letterhead. **A deposit slip will not be accepted.** Information on this form and the support documentation **must match.**

- a. Bank Name – The name of the bank where account is held.
- b. Bank Account Type – Indicate whether the account is checking or savings.
- c. Transit Routing Number – Enter the 9-digit Transit Routing Number.
- d. Bank Account Number – Enter bank account number.
- e. Direct Deposit Remittance Advice – Direct Deposit Remittance Advices are sent via e-mail when possible. Companies should provide an address that will not change, i.e. accounting@business.com.

5. IRS FORM W-9 CERTIFICATION AND SIGNATURE

- a. The Certification is copied from IRS Form W-9 (rev. January 2011). See IRS Form W-9 for further information.
- b. The Signature should be provided by the individual, owner, officer, legal representative or other authorized person of the entity listed on the form.
- c. Print the name and title, when applicable, of the person signing the form.
- d. Enter the date the form was signed. Forms over three years old will not be processed.

Do not complete any remaining areas. They are for State of Nevada use only.

Mail or Fax signed form to:

NEVADA STATE PURCHASING
515 E MUSSER ST STE 300
CARSON CITY NV 89701
Fax: 775/684-0188

Sending to any other location will delay processing.

Questions can be directed to 775/684-0187.

ATTACHMENT I – FACILITY SPECIFICATIONS



Attachment I-1
Facility Locations.doc



Attachment I-2
Facility Specifications



Attachment I-3
Facility Collect Calling



Attachment I-4
Facility Debit Calling.>

To open the document, double click on the icon.

*If you are unable to access the above inserted file
once you have doubled clicked on the icon,
please contact Nevada State Purchasing at
srvpurch@admin.nv.gov for an emailed copy.*

ATTCHMENT I-1

FACILITY LOCATIONS

Carlin Conservation Camp (CCC) 124 Suzie Creek Rd. Carlin, NV 89822	Casa Grande Transitional House (CGTH) 3955 W. Russell Rd., Las Vegas, NV 89118
Ely Conservation Camp (ECC) Horse & Cattle Camp Road Ely, NV 89301	Ely State Prison (ESP) 4569 N. State Route 490 Ely, NV 89301
Florence McClure Women's Correctional Center (FMWCC) 4370 Smiley Rd., N. Las Vegas, NV 89115	High Desert State Prison (HDSP) 22010 Cold Creek Rd. Indian Springs, NV 89070
Humboldt Conservation Camp (HCC) 8105 Conservation Road Winnemucca, NV 89446	Jean Conservation Camp (JCC) 3 Prison Rd., Jean, NV 89019
Lovelock Correctional Center (LCC) 1200 Prison Rd. Lovelock, NV 89419	Northern Nevada Correctional Center (NNCC) 1721 E. Snyder Ave. Carson City, NV 89701
Northern Nevada Restitution Center (NNRC) 2595 E. Second St. Reno, NV 89502	Pioche Conservation Camp (PCC) 1 Hardtimes Rd. Pioche, NV 89043
Southern Desert Correctional Center (SDCC) 20825 Cold Creek Rd. Indian Springs, NV 89018	Stewart Conservation Camp (SCC) 1721 E. Snyder Ave. Carson City, NV 89701
Three Lakes Valley Conservation Camp (TLVCC) 21055 Cold Creek Rd. Indian Springs, NV 89070	Tonopah Conservation Camp (TCC) 100 Conservation Rd. Tonopah, NV 89049
Warms Spring Correctional Center (WSCC) 3301 E. 5 th Street Carson City, NV 89701	Wells Conservation Camp (WCC) HC 67-502 Wells, NV 89835

ATTACHMENT I-2

CORRECTIONAL FACILITY SPECIFICATIONS

Contractors should base their responses on an Average Daily Population as detailed below:

Facility Name	FY14 Budgeted Population
CCC	127
CGTH	301
ECC	120
ESP	1058
FMWCC	808
HDSP	3238
HCC	116
JCC	162
LCC	1615
NNCC	1485
NNRC	87
PCC	149
SDCC	2018
SCC	346
TLVCC	241
TCC	134
WCC	546
WCC	116
Total	12,667

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**ATTACHMENT E-3
FACILITY COLLECT CALLING STATISTICS**

Average Monthly Collect (Based Upon 6 Months)

<i>Carlin Conservation Camp (CCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	203	5,543
Intralata	406	6,818
Interlata/Intrastate	767	12,375
Interstate	96	960
International	-	-

<i>Casa Grande Transitional Housing (CGTH)</i>		
Call Type	Number of Calls	Number of Minutes
Local	2,572	47,811
Intralata	113	1,775
Interlata/Intrastate	254	4,117
Interstate	81	1,190
International	-	-

<i>Ely Conservation Camp (ECC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	416	9,610
Intralata	80	1,516
Interlata/Intrastate	915	15,397
Interstate	56	633
International	-	-

<i>Ely State Prison (ESP)</i>		
Call Type	Number of Calls	Number of Minutes
Local	571	7,859
Intralata	1,046	12,000
Interlata/Intrastate	2,192	25,818
Interstate	326	3,957
International	-	-

<i>Florence McClure Women's Correctional Center (FMWCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	8,390	148,828
Intralata	250	3,266
Interlata/Intrastate	1,941	28,328
Interstate	804	9,155
International	-	-

<i>High Desert State Prison (HDSP)</i>		
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Call Type	Number of Calls	Number of Minutes
Local	5,419	118,332
Intralata	18,189	286,997
Interlata/Intrastate	2,289	40,428
Interstate	1,724	20,518
International	-	-

<i>Humboldt Conservation Camp (HCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	313	6,803
Intralata	451	6,049
Interlata/Intrastate	462	7,207
Interstate	30	396
International	-	-

<i>Jean Conservation Camp (JCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	1,956	35,207
Intralata	55	527
Interlata/Intrastate	747	10,142
Interstate	201	2,611
International	-	-

<i>Lovelock Correctional Center (LCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	3,327	80,197
Intralata	2,621	47,916
Interlata/Intrastate	4,022	71,532
Interstate	500	6,880
International	-	-

<i>Northern Nevada Correctional Center (NNCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	7,401	153,338
Intralata	832	14,308
Interlata/Intrastate	1,810	30,020
Interstate	584	7,096
International	-	-

<i>Northern Nevada Restitution Center (NNRC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	404	7,242
Intralata	65	870
Interlata/Intrastate	44	591
Interstate	32	322
International	-	-

<i>Pioche Conservation Camp (PCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	-	-
Intralata	322	4,790
Interlata/Intrastate	1,798	29,328
Interstate	91	1,124
International	-	-

<i>Southern Desert Correctional Center (SDCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	7,961	174,935
Intralata	13,875	220,616
Interlata/Intrastate	1,075	17,575
Interstate	742	9,208
International	-	-

<i>Stewart Conservation Camp (SCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	2,187	39,754
Intralata	347	5,498
Interlata/Intrastate	829	10,680
Interstate	175	2,051
International	-	-

<i>Three Lakes Valley Conservation Camp (TLVCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	656	14,353
Intralata	1,655	27,021
Interlata/Intrastate	163	2,537
Interstate	91	1,007
International	-	-

<i>Tonopah Conservation Camp (TCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	5	63
Intralata	560	7,122
Interlata/Intrastate	823	13,325
Interstate	124	1,346
International	-	-

<i>Warm Springs Correctional Center (WSCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	4,951	104,482
Intralata	484	8,091
Interlata/Intrastate	1,212	16,431
Interstate	317	3,516
International	-	-

<i>Wells Conservation Camp (WCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	-	-
Intralata	425	7,269
Interlata/Intrastate	951	14,972
Interstate	52	551
International	-	-

ATTACHMENT I-4
FACILITY DEBIT CALLING STATISTICS

Average Monthly Debit (Based Upon 6 Months)

<i>Carlin Conservation Camp (CCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	20	498
Intralata	47	655
Interlata/Intrastate	120	2,105
Interstate	12	91
International	-	-

<i>Casa Grande Transitional Housing (CGTH)</i>		
Call Type	Number of Calls	Number of Minutes
Local	554	8,328
Intralata	18	143
Interlata/Intrastate	87	1,395
Interstate	25	270
International	-	-

<i>Ely Conservation Camp (ECC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	36	792
Intralata	19	368
Interlata/Intrastate	184	2,462
Interstate	8	63
International	-	-

<i>Ely State Prison (ESP)</i>		
Call Type	Number of Calls	Number of Minutes
Local	245	3,464
Intralata	236	3,034
Interlata/Intrastate	755	9,162
Interstate	87	990
International	6	69

<i>Florence McClure Women's Correctional Center (FMWCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	2,947	54,749
Intralata	55	765
Interlata/Intrastate	565	7,651
Interstate	131	1,279
International	5	37

<i>High Desert State Prison (HDSP)</i>		
Call Type	Number of Calls	Number of Minutes
Local	1,258	28,895
Intralata	4,875	66,431
Interlata/Intrastate	513	7,267
Interstate	281	2,237
International	24	231

<i>Humboldt Conservation Camp (HCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	85	1,755
Intralata	148	1,851
Interlata/Intrastate	128	1,669
Interstate	10	76
International	0	0

<i>Jean Conservation Camp (JCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	520	9,117
Intralata	4	47
Interlata/Intrastate	283	3,992
Interstate	31	321
International	2	11

<i>Lovelock Correctional Center (LCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	1,082	24,037
Intralata	759	13,235
Interlata/Intrastate	1,071	17,855
Interstate	122	1,385
International	9	125

<i>Northern Nevada Correctional Center (NNCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	2,300	45,475
Intralata	216	3,579
Interlata/Intrastate	604	8,747
Interstate	181	1,932
International	15	134

<i>Northern Nevada Restitution Center (NNRC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	268	4,935
Intralata	26	455
Interlata/Intrastate	32	342
Interstate	11	126
International	4	95

<i>Pioche Conservation Camp (PCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	-	-
Intralata	60	923
Interlata/Intrastate	315	4,419
Interstate	15	117
International	1	4

<i>Southern Desert Correctional Center (SDCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	1,425	31,019
Intralata	3,448	46,982
Interlata/Intrastate	336	5,166
Interstate	144	1,467
International	16	137

<i>Stewart Conservation Camp (SCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	740	13,302
Intralata	156	2,356
Interlata/Intrastate	410	5,590
Interstate	67	615
International	1	5

<i>Three Lakes Valley Conservation Camp (TLVCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	92	1,890
Intralata	621	8,640
Interlata/Intrastate	45	481
Interstate	45	467
International	1	7

<i>Tonopah Conservation Camp (TCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	-	-
Intralata	167	1,812
Interlata/Intrastate	187	2,470
Interstate	23	532
International	1	4

<i>Warm Springs Correctional Center (WSCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	1,253	25,323
Intralata	138	2,344
Interlata/Intrastate	340	4,982
Interstate	50	404
International	1	8

<i>Wells Conservation Camp (WCC)</i>		
Call Type	Number of Calls	Number of Minutes
Local	-	-
Intralata	45	637
Interlata/Intrastate	168	2,314
Interstate	12	122
International	1	5

ATTACHMENT J – INMATE TELEPHONE EQUIPMENT REQUIREMENTS



Attachment J Inmate
Telephone Equipment

To open the document, double click on the icon.

*If you are unable to access the above inserted file
once you have doubled clicked on the icon,
please contact Nevada State Purchasing at
srypurch@admin.nv.gov for an emailed copy*

**Attachment J
Inmate Telephone Equipment Required**

Facility Name	# of Inmate Telephones	Vendor's Recommended # of Inmate Telephones	# of TDD Units	# of Portable Telephones
CCC	6		1	0
CGTH	24		1	0
ECC	5		1	0
ESP	21		1	14
FMWCC	67		1	4
HDSP	71		1	14
HCC	4		1	0
JCC	25		1	0
LCC	47		2	14
NNCC	51		2	4
NNRC	7		1	0
PCC	8		1	0
SDCC	87		1	4
SCC	11		1	0
TLVCC	15		1	0
TCC	6		1	0
WCC	21		1	4
WCC	6		1	0
Central-Inspectors	0		1	0

VENDOR _____

DATE _____

ATTACHMENT K – CONSENT FOR RELEASE OF CRIMINAL HISTORY RECORDS



Attachment K
Consent.pdf

To open the document, double click on the icon.

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srvpurch@admin.nv.gov for an emailed copy*

Mail Applications To:
NDOC Contracts
Attn: Martha Simas
P.O. Box 7011
Carson City, NV 89702

Nevada Department of Corrections

Attn: Contracts
Contractor Background Check Application
Please PRINT all information

Phone (775) 887-3319
Fax (775) 887-3225

1. NAMES AND ADDRESSES

Applicant Name _____
Last First MI

Please complete this questionnaire in its **ENTIRETY** and mail it back to the address listed above. **BE ADVISED: ANY omission or false statement is SUFFICIENT REASON FOR DENIAL.**

List any other names (alias) you are known by. Include your maiden name and any nicknames, if applicable)
(Failure to include all names will result in denial)

Current Physical Address _____
Full Street City State Zip

Current Mailing Address _____
Full Street City State Zip

Previous Address _____
Full Street City State Zip

Home Phone Number () _____

List any other states you have lived in: _____

Occupation or Business _____ Employer _____

Business Phone () _____ Contact Name: _____

Fax Number () _____

Have you ever worked for the Nevada Department of Corrections? Yes No If Yes, When? _____

2. IDENTIFIERS

Drivers License and or ID number _____ State _____

Date of Birth _____ Place of Birth _____ Age _____

SSN _____ Gender: Male Female

Race _____ Marital Status: Married Single

Height _____ Weight _____ Hair Color _____ Eye Color _____

Scars Marks or Tattoos _____

For Official Use Only

Application Review

Approved Denied

Signature of Authorized Personnel _____

Date _____

Please complete the 2nd page.

3. **Criminal History: ALL arrests must be listed, whether there was a conviction or not.** You must also list arrests in other states and countries. Do not exclude anything; any omission of an arrest is grounds for an automatic denial.

Have you **EVER** been arrested? Yes or No

Have you **EVER** been convicted of a Felony? Yes or No

If yes, complete the following, attach additional sheets if necessary.

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Charge _____ Disposition _____ Date of Arrest _____ City/State _____

Are you currently on Probation? Yes or No If yes, in what state? _____

4. **Do you or have you ever visited or corresponded with an inmate incarcerated in a Nevada Department of Corrections Facility?** Yes or No

If yes, complete the following section and attach additional sheets if necessary.

Name and Back Number	Relationship	Indicate whether you visit or write this inmate
_____	_____	_____
_____	_____	_____

5. **Authorization**

Chapter 179A of the Nevada Revised Statutes permits an Agency of the Criminal Justice to obtain records of criminal history regarding a prospective employee. Consent is not required in order to obtain information reflecting only convictions. Consent is required in order to obtain a complete record of criminal history.

The applicant's signature on this consent form will permit the Department of Corrections to obtain complete information regarding arrests, detention, indictments, information or other formal criminal charges and disposition of charges, including dismissals, acquittals, convictions, sentences, correctional supervision and release.

This information will be used only for purposes of determining employability. Chapter 179A of NRS prohibits an employer from dissemination of this information.

Applicants Signature _____ Date _____

_____ Date _____
Agency Authorization for Records Check

ATTACHMENT L – NDOC SECURITY REGULATIONS



Attachment L Security
Regulations.pdf

To open the document, double click on the icon.

*If you are unable to access the above inserted file
once you have doubled clicked on the icon,
please contact Nevada State Purchasing at
srvpurch@admin.nv.gov for an emailed copy*

Nevada Department of Corrections (NDOC)

Security Regulations Acknowledgement

All outside contractors/ subcontractors should understand that they are coming into a correctional facility to work.

As such safety and security are our primary responsibility. It is the responsibility of each and every contractor/subcontractor to adhere to every facilities security regulations. These regulations are not all inclusive.

Good judgment and communication should be used at all times. Violations of these regulations may result in immediate removal from the premises or possible prosecution under applicable State laws NRS 209.417, 212.100, 212.140, 212.150, 212.160, 212.165, 212.170, & 212.187.

**Please read and initial every item and sign at bottom to indicate you understand and will follow the rules.
This form is required before a background check will be processed.**

General Rules

- _____ 1. Background checks will be completed prior to access to any NDOC institutional property. Access will not be granted until a background check is passed. Applicants are approved under the company name on the application only.
 - A. Background checks will be renewed yearly to ensure the NDOC and the contractor; both have the most up to date information.
 - A.1. Contractors will disclose on the background application if they know an incarcerated individual.
 - B. Ex-Felons will not be allowed entry to prison grounds without the express written approval of the Director of the Department of Corrections or the Warden of the institution.
- _____ 2. Any contractor who finds he/she knows an inmate incarcerated at the institution he/she is working at, shall report it immediately to the facility and Northern Administration (where the background checks are done), so it can be documented.
 - A. Access to the institution, if an inmate is known will be Approved/Denied by the Warden.
- _____ 3. Contractors will not communicate (Talk) or fraternize with inmates unless required.
 - A. The Department of Corrections has a Zero Tolerance policy for any form of sexual misconduct to include staff/contractor/or volunteer on inmate or inmate on inmate sexual harassment, sexual assault, sexual abusive contact and consensual sex. Any staff member/contractor/volunteer who engages in, fails to report, or knowingly condones sexual harassment or sexual contact with or between inmates shall be subject to disciplinary action and may be subject to criminal prosecution. The Department shall take a proactive approach regarding the prevention, detection, response and punishment of any type of sexual contact.
 - B. If Sexual abuse or harassment is witnessed it must be reported to the Warden immediately.
- _____ 4. Items that are prohibited (forbidden, illegal) from the State Correctional property (this includes inside the fence line as well as outside the fence line) include but are not limited to:
 - A. All Tobacco Products
 - B. All Narcotics, Drugs, Alcohol, Firearms, explosives or Other Weapons.
 - C. Telecommunication devices. (Cell phones, PDA's., MP3 players, ect...)
 - D. Cameras are not allowed without prior written permission from the Warden of the facility.
 - E.. Metal or Glass objects (Eating utensils, bottles, ect.)
 - F. Do not bring valuables onto institutional property. (These items must be locked in your vehicle outside)
- _____ 5. Laptop computers will only be allowed upon written permission from the Director of NDOC, the Warden, or the Associate Warden(s) approvals are on a per visit basis.
 - A. NDOC Form 003 or Form 006 must be filled out and signed, and approved prior to bringing any telecommunications or computer items in to any correctional facility.