

1 JUSTICE COURT, _____ TOWNSHIP
2 _____ COUNTY, NEVADA

3 Name: _____)

4 Address: _____)

5 Phone: _____)

6 Tenant,

7 -vs-

8 Name: _____)

9 Landlord.

CASE NO.: _____

DEPT. NO.: _____

**MOTION TO CONTINUE IN POSSESSION
(Elderly or Disabled Tenants Only)**

COMES NOW, the undersigned tenant and hereby states as follows:

1. I am the Tenant of rental premises located at (address) _____ within

_____ Township, _____ County, Nevada.

2. The length of my lease agreement is as follows:

Indefinite with no specific expiration date;

Based on monthly rental payments;

Based on weekly rental payments (**Note: if you have a weekly tenancy, you may not use this Motion**);

Other (explain): _____

3. I Have or Have Not received an eviction notice or letter to vacate the rental premises. Said eviction notice or letter, if any, demanded that I vacate the rental premises by _____.

4. I am:

60 Years of age or older (attach verification); or

Physically or mentally disabled (attach verification).

5. I Have or Have Not provided Landlord with a written request to continue in possession for an additional 30 days along with proof of my age and/or disability but Landlord has refused to provide me any extension of time.

NOTE: If you have not provided your Landlord with a written request to continue in possession and/or you have not furnished proof of your age or disability, you are not eligible to request any extension of time pursuant to this motion.

6. Based on the above, I request that the Court order Landlord to allow me to remain in possession of my rental premises until _____ which is no more than 30 days.

I declare under penalty of perjury under the laws of the State of Nevada that the foregoing is true and correct.

(date)

(type or print name)

(signature)