

Hansen Sheet



Separator Sheet

City of Las Vegas400 Stewart Ave
Las Vegas, NV 89101-2927**SUMMERLIN/SUN CITY DEVIATION****Report Date** 09/15/2006 08:10 AM**Submitted By**

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A/P # 15557 **Type** SCD **Issued Date** **Issued By****Parcel** 13726816024**Location****Owner** NORRIS LISA C**Phone****Address** 239 BAMBOO FOREST PL
LAS VEGAS NV 89138-1500**Country** ☐ Foreign**Applicant's Full Name** LISA NORRIS**Day Phone** (702)205-7262 x**Fax** (702)255-8297**Pager****Address** 239
BAMBOO FORST PLACE
LAS VEGAS NV
89138**Fees**

PROCESSING FEE

300.00

Total Paid

300.00

Declared Value 0.00**Calculated Value** 0.00**Actual Value** 0.00**Type of Work****Square Footage** 0.00**Comments**

No Comments

Signature of Owner (If Owner Builder)

Date

Signature of Contractor or Authorized Agent

Date

City of Las Vegas
400 Stewart Ave
Las Vegas, NV 89101-2927

SCD Application

Report Date 09/15/2006 08:09 AM

Submitted By

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A/P # 15557 SUMMERLIN/SUN CITY DEVIATION

Application Information

Stages

	Date / Time	By		Date / Time	By
Processed	08/01/2006 13:17	983052	Temp COO		
Approved			COO Issued		
Final			Expires		

Associated Information

Type of Work	# Plans	0	Declared Valuation	0.00
Dept of Commerce	# Plans	0	Calculated Valuation	0.00
Priority	☒ Auto Reviews	Bill Group	Actual Valuation	0.00

Description of Work

No Comments

Parent A/P

Project #	15557	Project/Phase Name	Phase #
Size/Area	0.00	Size Description	Subdivision Code
Proposed Start		Proposed Stop	% Completed 0.00
% Complete Formula			

Property/Site Information

Parcel 13726816024

Location

Owner/Tenant

Contact ID	AC456941	Name	NORRIS LISA C	Profession	
Organization		Position			
Mailing Address	239 BAMBOO FOREST PL				
City	LAS VEGAS	State/Province	NV	ZIP/PC	89138-1500
Country		☐ Foreign		Reference #	
Day Phone		Evening Phone		Fax	
Pager		PIN #		Mobile #	
		E-Mail			
Owner From	11/20/2002	To	☒ Primary	100.00 %	

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Contacts

Contact ID	AC25398	Name	P N II INC	Position	% D BOETTCHER	Profession	
Organization	% PULTE HOMES NV						
Mailing Address	1635 VILLAGE CENTER CIR #250						
City	LAS VEGAS		State/Province	NV		ZIP/PC	89134-0574
Country			☐ Foreign			Reference #	
Day Phone			Evening Phone			Fax	
Pager			PIN #			Mobile #	
			E-Mail				
Owner From	08/10/2002	To	11/20/2002	☐ Primary	0.00 %		

Linked Addresses

No Addresses are linked to this Application

A/P Linked Addresses

239 BAMBOO FOREST PL
LAS VEGAS, 89138-

Linked Parcels

No Parcels are linked to this Application

A/P Linked Parcels

13726816024

Applicants/Contacts

Primary	Y	Capacity	APPL	Contact ID	AC1249934	☐ Foreign
Effective		Expire				
Name	LISA NORRIS					
Day Phone	(702)205-7262 x		Eve Phone	Organization		
Pager			PIN #	Position		
Fax	(702)255-8297		Mobile	Profession		
E-Mail						
Address	239 BAMBOO FORST PLACE LAS VEGAS, NV 89138					
Seasonal Addr						
Valid From			To			
Comments						
No Comments						

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Contractors

No Contractors

Fees	Status	Paid Date	Amount
PROCESSING FEE	P	08/01/2006 13:32	300.00
	Total Unpaid	0.00	Total Paid 300.00

Template Type A/P #	A/P Type	Status	Stage
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No children exist for this project

Employee ID	Last	First	MI	Comments
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No Employee Entries

Log Action	Description	Entered By	Start	Stop	Hours
PAYMNT	CK NAME,# WHO PICKED UP PERMIT Alvarado Cates Jr. pd ck #1065, 255-8297	984018	08/01/2006 13:32		0.00

Refund



Separator Sheet



City of Las Vegas Claim for Refund

Refund to be issued to:

Lisa Norris
239
Bamboo Forst Place
Las Vegas, NV 89138
(702)205-7262 x

Transaction Date: September 18, 2006 9:05 am

SCD-15557

PROCESSING FEE

AUTHORIZED BY: DRANKIN

Refund Amount

\$ 300.00

Refund Total: \$ 300.00

Reason for refund: NOT NEEDED. PER DOUG RANKIN. FEE REFUNDED.

Claimant Signature

CITY of LAS VEGAS CLAIM FOR REFUND

09/15/06
Date

TO: Finance and Business Services, Accounts Payable

Please issue warrant to:

Lisa C. Norris

Name

2391 Bamboo Forest Pl.

Address

Las Vegas, NV. 89138

City, State, Zip Code

In the amount of

\$ 300-

For the following:

NO GR #

Document # (i.e., GR#, Business License #, Permit #)

09/15/06

Date

\$ 300-

Amount

SCD-15557

For

Deposited by

Reason for refund: NOT needed. Per Doug Rankin.

Claimant Signature

I certify this demand is true and correct; is unpaid and due the claimant.

FLTR

Authorized by

PLANNING MANAGER

Title

Hansen Refund Account #:

100000.00000.160870.000000.000.000

FUND ORG	ACCT	TASK	OPT.	ACT/WA	AMOUNT
00730126	1100E	220000	000000		\$300-

Nora Lares

From: Doug Rankin
Sent: Thursday, August 24, 2006 11:20 AM
To: Nora Lares
Subject: FW: Lisa Norris Refund

Follow Up Flag: Follow up
Flag Status: Red

Please Refund SCD-15557 as it is no longer needed.

From: Fred Solis
Sent: Tuesday, August 22, 2006 3:53 PM
To: Doug Rankin
Subject: Lisa Norris Refund

The case number is SCD-15557

Thx

Fred Solis
Planner II
City of Las Vegas Planning Department
702-229-5409
702-474-0352 (fax)
fsolis@lasvegasnevada.gov