

Plans (PMT)



Separator Sheet

Action Letter



Separator Sheet



TEMPORARY COMMERCIAL PERMIT

MOTHERS DAY FLOWERS

TCP-13531

Valid May 12, 2006 To May 14, 2006



Description of Event: Three day event selling stuffed toy bears in clear plastic bags w/ silk flowers. Event runs from 9am to 9pm, 12 May to 14 May '06 from 10'x 15' tent located in southeastern portion of parking lot.

Applicant: Flushman Sharlene 2005 Liv Tr
Dr. Josh Flushman - 384-4808
Flushman Sharlene Trs
2840 E Viking Rd
Las Vegas, NV 89121-4118
(702)384-4808 x

Parcel(s): 139-35-413-025

Ward(s): Ward 5 (Weekly)

THIS PERMIT IS APPROVED PURSUANT TO SECTION 19.18.100 OF THE LAS VEGAS MUNICIPAL CODE, SUBJECT TO THE FOLLOWING CONDITIONS:

1. BUSINESS HOURS SHALL NOT EXTEND PAST 9:00 pm.
2. THIS PERMIT IS NOT A BUSINESS LICENSE.
3. THIS PERMIT IS NOT A SUBSTITUTE FOR ANY REQUIRED STATE OR LOCAL BUSINESS LICENSE OR FOR ANY REQUIRED CHARITABLE SOLICITATION PERMIT.
4. This use shall not create a nuisance to nearby properties as a result of factors such as excessive illumination, glare, noise, vibration, smoke, dust, dirt, odors, gases or heat.
5. The use shall conform to the submitted plot plan.
6. No combustible materials shall be located within 50 feet of any structure on, or adjacent to this site.
7. No building or structure of any type shall be erected closer than 25 feet from any property line.
8. The applicant shall display a copy of this Temporary Commercial Permit during the hours of operation.
9. Sanitation facilities must be provided in accordance with the Clark County Health District and Republic Services of Southern Nevada.
10. The applicant shall provide private security officers as required by the Las Vegas Metropolitan Police Department.
11. Any signage for this temporary commercial use must be approved and permitted by the Planning and Development Department.
12. All applicable City code requirements shall be satisfied.
13. The applicant shall be responsible for leaving the site free of debris, litter or any other evidence of occupancy upon completion or removal of the use.

THIS PERMIT SHALL BE POSTED IN A CONSPICUOUS PLACE

Justification Letter



Separator Sheet

Joshua D. Flushman

Mothers Day

05/04/06

Tommy Parker

Bear In A Bag

This Is Our Justification Letter

Telling You That We Are Going To Have

A Three Day Event Selling Toy Stuffed Bear

In A Clear Plastic Bag Silk Flowers

Our Event Starinng Date Is

05/12/06 9Am To 9Pm

And Endinng On 05/14/06 9Pm

In The ~~Charleston~~ Chiropractic Parkinglot

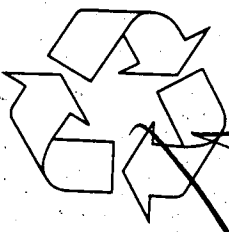
Located AT 1601 E. Charleston BLVD.

Las Vegas

Joshua D. Flushman

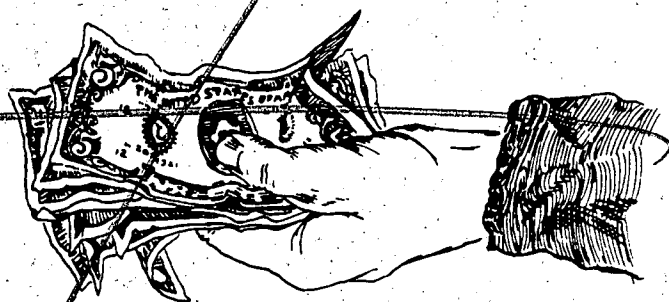
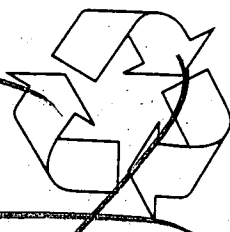
5/4/06

RECEIVED
APR 09 2006



D & L

SCRAP METALS



**WE BUY X-RAY
FILM
NEGATIVE FILM
LITHO PLATES
ALL TYPES OF CARBIDE
TOOLING etc.**

CASH FOR SCRAP

1-800-938-0490

WE COME TO YOU

ASK FOR TOM OR DEWEY

Application



Separator Sheet

PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Mothers Day Bear In A Bag
 Project Address (Location): 1601 E. Charleston Blvd., LV, NV 89104
 Project Name: Mothers Day Proposed Use: Gifts
 Assessor's Parcel #(s): 139 35 413 025 Ward #: 5
 General Plan: existing C proposed _____ Zoning: existing C1 proposed _____
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres: .16 Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER: Dr. Josh Flushman Contact: Dr. Josh Flushman
 Address: 1601 E. Charleston Blvd. Phone: 384-4808 Fax: 384-9253
 City: Las Vegas State: NV Zip: 89104

APPLICANT: Dr. Josh Flushman / Tommy Parker Contact: 384-4808, 756-0621
 Address: 1601 E. Charleston Blvd. Phone: same Fax: 384-9253
 City: Las Vegas State: NV Zip: 89104

REPRESENTATIVE _____ Contact _____
 Address _____ Phone: _____ Fax: _____
 City _____ State _____ Zip _____

Property Owner Signature* Dr. Josh Flushman

* An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps, and Parcel Maps.

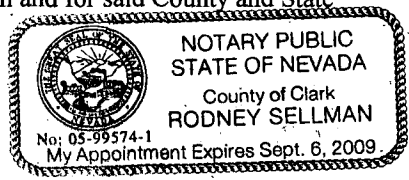
Print Name: Dr. Josh Flushman

Subscribed and sworn before me

This 9th day of May, 20 06

Rodney A Sellman

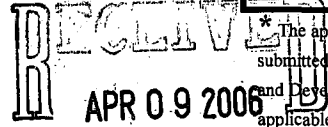
Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case #	<u>TCP 13531</u>
Meeting Date:	_____
Total Fee:	<u>\$100.00</u>
Date Received:	<u>9 May 06</u>
Received By:	<u>Mike Horne</u>

* The application will not be deemed complete until the submitted materials have been reviewed by the Planning and Development Department for consistency with applicable sections of the Zoning Ordinance.



Hansen Sheet



Separator Sheet

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

TEMPORARY COMMERCIAL PERMIT

Report Date 06/06/2006 09:06 AM

Submitted By

Page 1

A/P # 13531 Type TCP Issued Date 05/11/2006 Issued By 981665

Parcel 13935413025

Location

Owner FLUSHMAN SHARLENE 2005 LIV TR

Phone (702)384-4808 x

Address 2840 E VIKING RD

LAS VEGAS NV 89121-4118

Country

☐ Foreign

Applicant's Full Name FLUSHMAN SHARLENE 2005 LIV TR

Day Phone (702)384-4808 x

Fax

Address 2840 E VIKING RD

Pager

LAS VEGAS NV

89121-4118

Fees

PROCESSING FEE

100.00

Total Paid

100.00

Declared Value 0.00

Type of Work

Calculated Value 0.00

Square Footage

0.16 ACRE

Actual Value 0.00

Comments

Three day event selling stuffed toy bears in clear plastic bags w/ silk flowers. Event runs from 9am to 9pm, 12 May to 14 May '06 from 10'x 15' tent located 1601 E Charleston Blvd., southeast portion of parking lot.

Signature of Owner (If Owner Builder)

Date

Signature of Contractor or Authorized Agent

Date

Report Date 06/06/2006 09:01 AM

Submitted By

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Applicants/Contacts

Primary N Capacity OWNER Contact ID AC1073138 ☐ Foreign
Effective Expire
Name FLUSHMAN SHARLENE 2005 LIV TR
Day Phone (702)384-4808 x Eve Phone Organization
Pager PIN # Position FLUSHMAN SHARLENE TRS
Fax Mobile Profession
E-Mail
Address 2840 E VIKING RD
LAS VEGAS, NV 89121-4118
Seasonal Addr

Valid From To
Comments
Dr. Josh Flushman - 384-4808

Primary Y Capacity APPL Contact ID AC1073138 ☐ Foreign
Effective Expire
Name FLUSHMAN SHARLENE 2005 LIV TR
Day Phone (702)384-4808 x Eve Phone Organization
Pager PIN # Position FLUSHMAN SHARLENE TRS
Fax Mobile Profession
E-Mail
Address 2840 E VIKING RD
LAS VEGAS, NV 89121-4118
Seasonal Addr

Valid From To
Comments
Dr. Josh Flushman - 384-4808

Contractors

No Contractors

Item Description Item Status

Check Conditions
Condition Approval Approved By Approved Date Applied By Applied Date Assigned
Supervisor Required Comments

No Conditions

Planning Condition Description Effective Expire Comments

There is no planning condition for this project.

Template Type A/P # A/P Type Status Stage

No children exist for this project.

Employee
Employee ID Last First MI Comments

No Employee Entries

Report Date 06/06/2006 09:01 AM

Submitted By

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Log Action Comments	Description	Entered By	Start	Stop	Hours
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PAYMNT	CK NAME,# WHO PICKED UP PERMIT TOMMY PARKER, CASH, 756-0621	970040	05/09/2006 12:57		0.00
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