



December 20, 2006

CERTIFIED & REGULAR MAIL

LAS VEGAS CITY COUNCIL

OSCAR B. GOODMAN
MAYOR

GARY REESE
MAYOR PRO TEM

LARRY BROWN
LAWRENCE WEEKLY
STEVE WOLFSON
LOIS TARKANIAN
STEVEN D. ROSS

DOUGLAS A. SELBY
CITY MANAGER

Ms. Azalea Peral
1919 East Fremont Street
Las Vegas, Nevada 89012

Re: Notice of Appeal Hearing – Notice and Declaration of Chronic Nuisance on property located at 1919 East Fremont Street

Dear Ms. Peral:

You are hereby notified that a hearing has been scheduled before the Las Vegas City Council at 400 Stewart Avenue, Las Vegas, Nevada on the 3rd day of January, 2007, at the hour of 1:00 p.m. This hearing is in response to the letter from you dated December 5, 2006 requesting the same, concerning the Notice and Declaration of Chronic Nuisance on property located at 1919 East Fremont Street.

You may be, but need not be, represented by counsel. You may present any relevant evidence and will be given full opportunity to cross-examine all witnesses testifying against you. You may request the issuance of subpoenas to compel the attendance of witnesses and the production of book, documents or other things by filing an affidavit therefore with the City Clerk on behalf of the Las Vegas City Council.

If you have any questions or need further information please do not hesitate to contact our office at 229-6311.

Sincerely,

A handwritten signature in black ink, appearing to read "Barbara Jo Ronemus".

Barbara Jo Ronemus
City Clerk

BJR/vwd

cc: Stephen Harsin, Director, Neighborhood Services
Devin Smith, Manager, Neighborhood Response, Neighborhood Services
Tom Green, Deputy City Attorney
Paul Wilkins, Director, Department of Building & Safety
Ricki Barlow, Ward 5 Liaison

CITY OF LAS VEGAS
400 STEWART AVENUE
LAS VEGAS, NEVADA 89101

VOICE 702.229.6011

TTY 702.386.9108

www.lasvegasnevada.gov

18112-001-06-05
CLV 7009





December 21, 2006

CERTIFIED & REGULAR MAIL

LAS VEGAS CITY COUNCIL

OSCAR B. GOODMAN
MAYOR

GARY REESE
MAYOR PRO TEM

LARRY BROWN
LAWRENCE WEEKLY
STEVE WOLFSON
LOIS TARKANIAN
STEVEN D. ROSS

DOUGLAS A. SELBY
CITY MANAGER

Ms. Azalea Peral
1919 East Fremont Street
Las Vegas, Nevada 89012

Re: Notice of Appeal Hearing – Notice and Declaration of Chronic Nuisance on property located at 1919 East Fremont Street

Dear Ms. Peral:

You are hereby notified that a hearing has been rescheduled before the Las Vegas City Council at 400 Stewart Avenue, Las Vegas, Nevada from the 3rd day of January, 2007, to the 17th day of January, 2007, at the hour of 1:00 p.m. This hearing is in response to the letter from you dated December 5, 2006 requesting the same, concerning the Notice and Declaration of Chronic Nuisance on property located at 1919 East Fremont Street.

You may be, but need not be, represented by counsel. You may present any relevant evidence and will be given full opportunity to cross-examine all witnesses testifying against you. You may request the issuance of subpoenas to compel the attendance of witnesses and the production of book, documents or other things by filing an affidavit therefore with the City Clerk on behalf of the Las Vegas City Council.

If you have any questions or need further information please do not hesitate to contact our office at 229-6311.

Sincerely,

A handwritten signature in black ink, appearing to read "Barbara Jo Ronemus", is written over a horizontal line.

Barbara Jo Ronemus
City Clerk

BJR/vwd

cc: Stephen Harsin, Director, Neighborhood Services
Devin Smith, Manager, Neighborhood Response, Neighborhood Services
Tom Green, Deputy City Attorney
Paul Wilkins, Director, Department of Building & Safety
Ricki Barlow, Ward 5 Liaison
Darcy Hayes, Ward 3 Liaison

CITY OF LAS VEGAS
400 STEWART AVENUE
LAS VEGAS, NEVADA 89101

VOICE 702.229.6011

TTY 702.386.9108

www.lasvegasnevada.gov

18112-001-06-05
CLV 7009



SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Francisco</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Francisco Chavero</i></p> <p>C. Date of Delivery <i>12-23-06</i></p>
<p>1. Article Addressed to:</p> <p>Ms. Azalea Peral 1919 East Fremont Street Las Vegas, Nevada 89012</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED CITY CLERK DEC 27 10:10</p> <p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7005 3110 0001 3040 7510</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee <i>Francisco</i></p> <p>B. Received by (Printed Name) <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee CITY CLERK</p> <p>C. Date of Delivery</p>
<p>1. Article Addressed to:</p> <p>uisance/1919 E Fremont St</p> <p>Ms. Azalea Peral 1919 East Fremont Street Las Vegas, Nevada 89012</p>	<p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If YES, enter delivery address below:</p> <p>RECEIVED CITY CLERK DEC 26 10:40</p> <p>3. Service Type <input type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail <input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise <input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p>7005 3110 0002 6462 7433</p>
<p>PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540</p>	