



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-25366** APN: 140-32-502-003

Name of Property Owner: CONSTANTINO NOVAL

Name of Applicant: NEVADA HEALTH CENTERS, INC.

Name of Representative: ROBIN TANAKA

To the best of your knowledge, does the Mayor or any member of the City Council or Planning Commission have any financial interest in this or any other property with the property owner, applicant, the property owner or applicant's general or limited partners, or an officer of their corporation or limited liability company?

Yes

No

If yes, please indicate the member of the City Council or Planning Commission who is involved and list the name(s) of the person or persons with whom the City Official holds an interest. Also list the Assessor's Parcel Number if the property in which the interest is held is different from the case parcel.

City Official: _____

Partner(s): _____

APN: _____

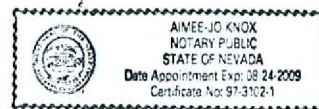
Signature of Property Owner: Constantino Noval

Print Name: CONSTANTINO NOVAL

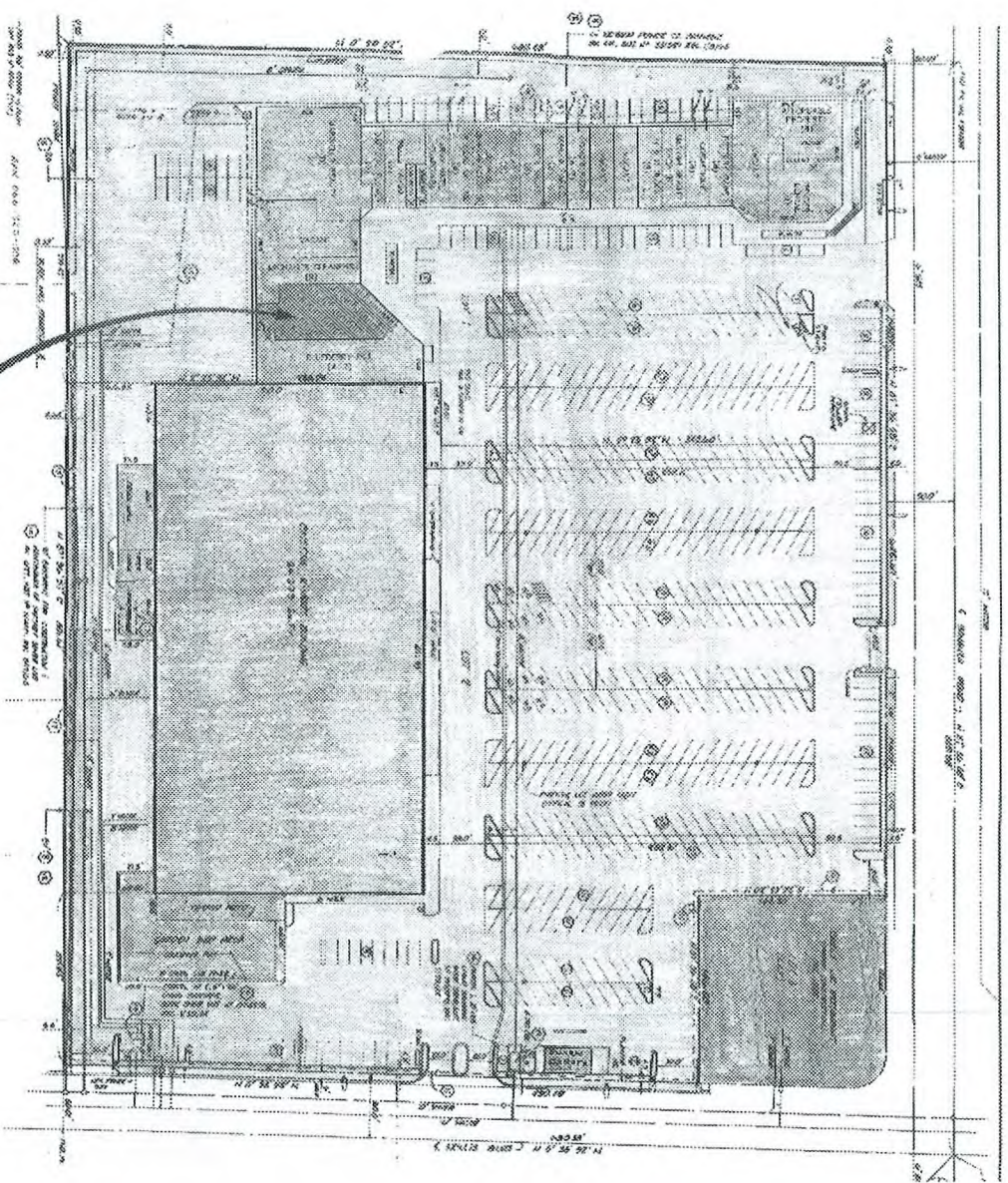
Subscribed and sworn before me

This 17 day of Sept, 2007

Aimee Jo Knox
Notary Public in and for said County and State



RECEIVED
OCT 30 2007

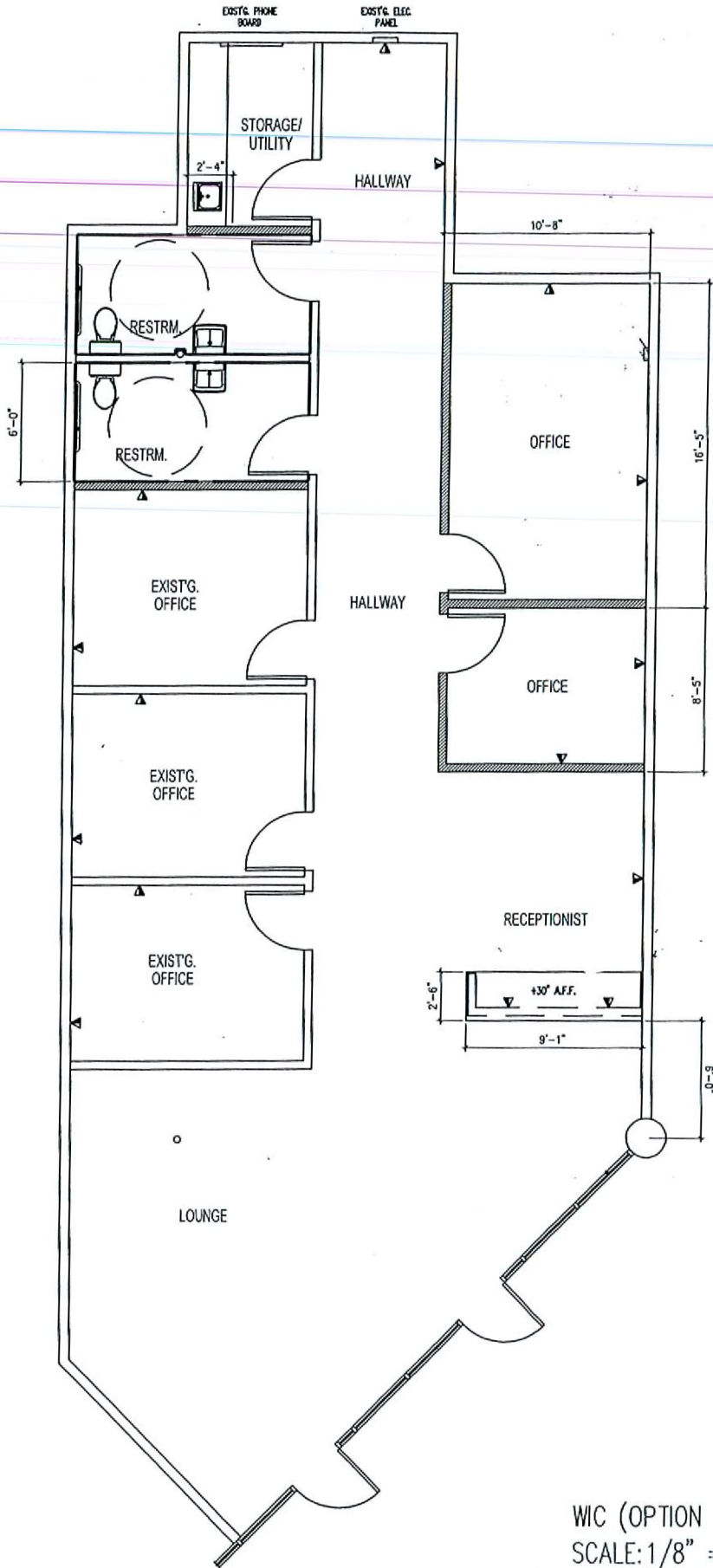




WIC
 Suite 104 & 106
 5001 E. Bonanza Rd.
 Las Vegas, NV 89110

SUP-25366
RECEIVED
12/20/07 PC
OCT 30 2007

# REVISION BY	 GREATER NEVADA PLANNING, Inc. Greater Nevada Planning, Inc. 8810 S. Eastern Ave., Ste. 8 Las Vegas, NV 89123-2856 Ph: 702-312-2426 Fax: 702-312-3716 License: 82127 SIGNATURE	WIC Suite 104 & 106 5001 E. Bonanza Rd. Las Vegas, NV 89110 STEPHAN	DATE: 07/20/2007 DRAWN: SYP/ER SCALE: AS NOTED SHEET A01.01
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WIC (OPTION 2)
 SCALE: 1/8" = 1'-0"
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