

NOTICE OF PUBLIC HEARING

AUGUST 18, 2010

Pursuant to Las Vegas Municipal Code for the Abatement of Dangerous Buildings/Nuisance Code and/or Housing Code, NOTICE IS HEREBY GIVEN THAT ON **WEDNESDAY, AUGUST 18, 2010**, at the hour of **1:00 P.M.** in the City Council Chambers, 400 Stewart Avenue, Las Vegas, Nevada, the City Council will consider the REPORT OF EXPENSES submitted by the Director of Neighborhood Services for:

Waiver and/or reduction of abatement costs, daily civil penalties and accrued interest for the violations on the property located at **1640 L Street – Case #65688**. The Director of Neighborhood Services certifies that abatement costs, daily civil penalties and accrued interest in the total sum of **\$54,250.21** were imposed. Owner of record: **BANK LASALLE NATIONAL ASSN TRS – WARD 5 (BARLOW)**

If the City Council is satisfied with the report, it may release the lien of assessment recorded against the property. Any person affected by the proposed charge may file a written protest with the City Clerk any time prior to the hearing. Each protest must contain a description of the property and the grounds for the protest.

BEVERLY K. BRIDGES
CITY CLERK

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
■ 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.	A. Signature ☐ Agent ☐ Addressee X <u>Francis Blackshear</u>
1. Article Addressed to: 8/18/2010 Case #65688 LaSalle Bank National Association TRS c/o Litton Loan Servicing 4828 Loop Central Drive, #600 Houston, TX 77081-2212	B. Received by (Printed Name) C. Date of Delivery <u>CITY CLERK</u> <u>8-6-2010</u>
2. Article Number (Transfer from service label) 7007 3020 0003 1596 5794	D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: <u>2010 AUG -9 A 10:59</u>
3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	

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■ 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.	A. Signature ☒ Agent ☐ Addressee X <u>Deni Nela</u>
1. Article Addressed to: 8/18/2010 Case #65688 Mr. Michael Brooks, Attorney 300 S. 4th Street <u>#815</u> Las Vegas, NV 89101	B. Received by (Printed Name) C. Date of Delivery <u>Deni Nela</u> <u>8-5-10</u>
2. Article Number (Transfer from service label) 7007 3020 0003 1596 5787	D. Is delivery address different from item 1? ☐ Yes ☐ No If YES, enter delivery address below: <u>2010 AUG -9 A 10:58</u>
3. Service Type ☐ Certified Mail ☐ Express Mail ☐ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D.	
4. Restricted Delivery? (Extra Fee) ☐ Yes	
PS Form 3811, February 2004 Domestic Return Receipt 102595-02-M-1540	