



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **MSP-38116** APN: 138-22-418-011

Name of Property Owner: SEA BREEZE VILLAGE II, LLC

Name of Applicant: Visual Information Systems Co.

Name of Representative: Ed Blend

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: _____

Print Name: HASKEL INY

Subscribed and sworn before me

This 9 day of March, 20 10

Trina M. Perales
Notary Public in and for said County and State





PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: AMEND MSP-2619
Project Address (Location) 7598 Vegas Dr.
Project Name Carl's Jr. Proposed Use _____
Assessor's Parcel #(s) 138-22-418-011 Ward # 4
General Plan: existing ☒ proposed _____ Zoning: existing ☒ proposed _____
Commercial Square Footage _____ Floor Area Ratio _____
Gross Acres .52 Lots/Units 1 Density _____
Additional Information AMEND THE SEABREEZE VILLAGE MSP TO INCLUDE
INCIDENTAL SIGNAGE FOR CARL'S JR. RESTAURANT

PROPERTY OWNER SEA BREEZE VILLAGE II, LLC Contact JENNIFER ROBERTS
Address 1710 N. BUFFALO #101 Phone: 702-253-5511 Fax: 702-430-5307
City LAS VEGAS State NV Zip 89128
E-mail Address jro@greatac.com

APPLICANT Visual Information Systems Co. Contact Ed Blend
Address 13580 5th St. Phone: 909-591-4742 Fax: _____
City Chino State CA Zip 91710
E-mail Address _____

REPRESENTATIVE Ed Blend Contact _____
Address 13580 5th St. Phone: 909-287-7373 Fax: _____
City Chino State CA Zip 91710
E-mail Address eblend@nsmc.com

Property Owner Signature* _____

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

Print Name Haskel Iny

Subscribed and sworn before me

This 9 day of March, 20 10

Trina M. Perales

FOR DEPARTMENT USE ONLY

Case #	<u>MSP-38116</u>
Meeting Date:	<u>6/24/2010</u>
Total Fee:	<u>330.00</u>
Date Received:*	<u>4/27/2010</u>
Received By:	<u>MREX</u>

Notary Public in and for said County and State



TRINA M. PERALES
Notary Public-State of Nevada
APPT. NO. 09-8929-1
My App. Expires December 12, 2012

*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.