PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **RQR-40547** APN: 16203411010

Name of Property Owner: Chetak Development, Inc.

Name of Applicant: Princess Massage

Name of Representative: _____

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: Richard W. Truesdell (Plan. Comm.)

Partner(s): Will Kemp _____

APN: 16203411010

Signature of Property Owner: Will Kemp, Pres.

Print Name: Will Kemp, President

Subscribed and sworn before me

This 13 day of December, 2010

Notary Public in and for said County and State

MONICA JACOBS
Notary Public State of Nevada
No. 08-6784-1
My appt. exp. Apr. 25, 2012

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DEC 21 2010

PLANNING & DEVELOPMENT

PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Required One Year Review

Project Address (Location) 2212-2214 Paradise Road

Project Name Princess Massage **Proposed Use** Massage Estab.

Assessor's Parcel #(s) 16203411010 **Ward #** 3

General Plan: existing C proposed _____ **Zoning:** existing C-1 proposed _____

Commercial Square Footage _____ **Floor Area Ratio** _____

Gross Acres 0.36 **Lots/Units** _____ **Density** _____

Additional Information _____

PROPERTY OWNER Chetak Development, Inc. c/o Cornerstone Company **Contact** Justin Michaels

Address 9901 Covington Cross Drive, #170 **Phone:** (702) 383-3033 **Fax:** (702) 383-8576

City Las Vegas **State** NV **Zip** 89144

E-mail Address jmichaels@cornerstonecompany.com

APPLICANT Princess Massage **Contact** Douglas Wingo

Address 2212 Paradise Rd **Phone:** (702) 630-9920 **Fax:** _____

City Las Vegas **State** NV **Zip** 89104

E-mail Address Oceans0023@Hotmail.com

REPRESENTATIVE _____ **Contact** _____

Address _____ **Phone:** _____ **Fax:** _____

City _____ **State** _____ **Zip** _____

E-mail Address _____

Property Owner Signature* _____

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

Print Name Will Kemp

Subscribed and sworn before me

This 13th day of December, 2010.

_____

Notary Public in and for said County and State

MONICA JACOBS
Notary Public State of Nevada
No. 08-6784-1
My appt. exp. Apr. 25, 2012

FOR DEPARTMENT USE ONLY

Case #	RQR-40547
Meeting Date:	2/8/11 PC
Total Fee:	$800
Date Received:*	12-21-10
Received By:	

*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.

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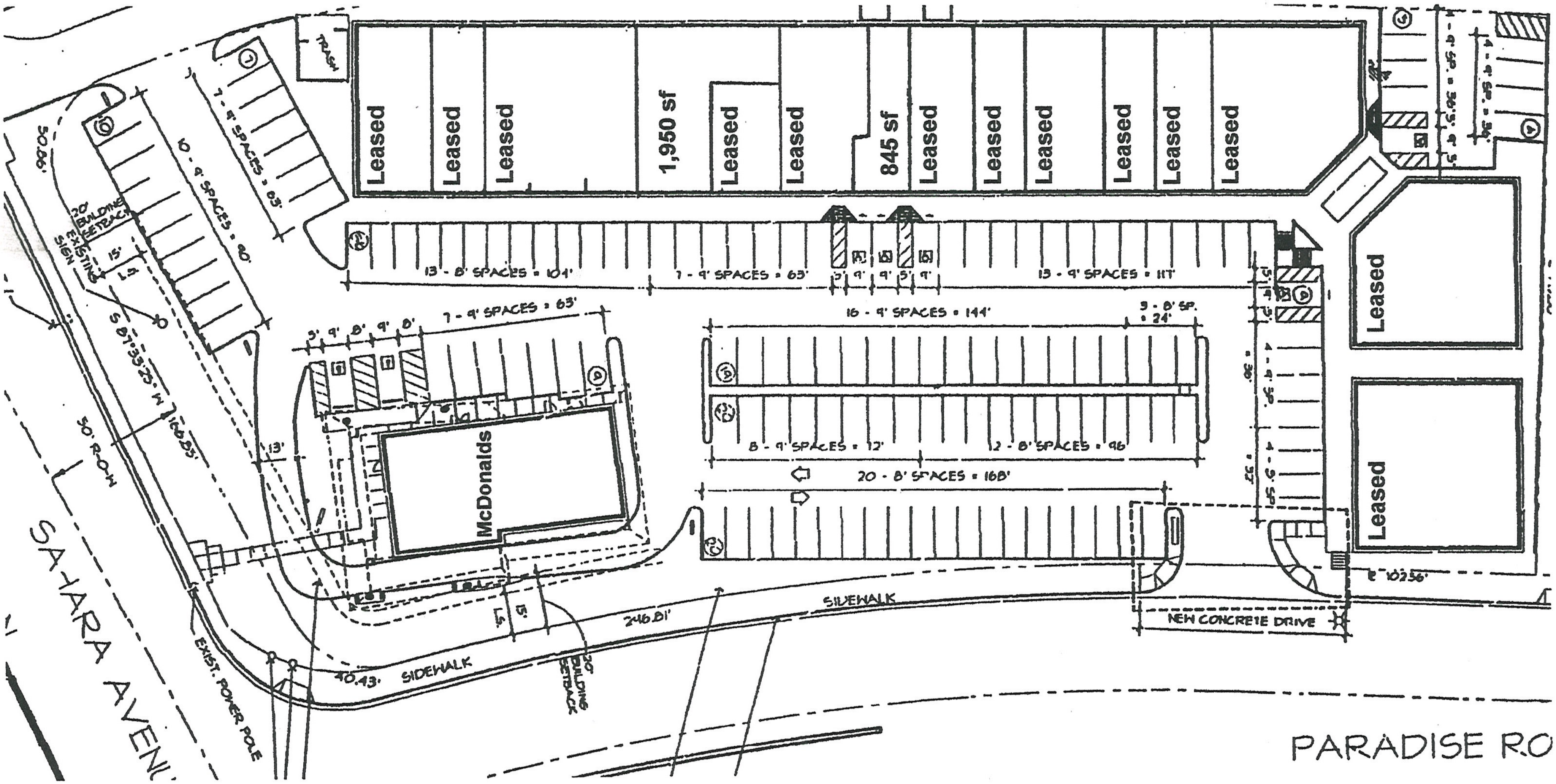
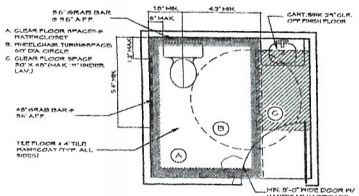
Revised 10/27/08

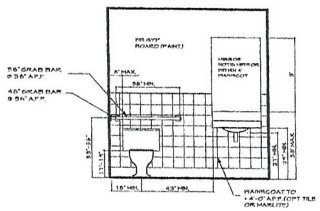
f:\depot\Application Packet\Application Form.pdf



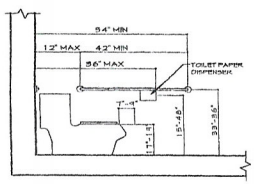


1 HANDICAP RESTROOM
NOT TO SCALE

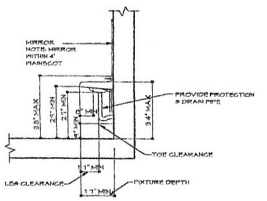
NOTE: PROVIDE ELECTRIC EXHAUST FAN (TYP. ALL RESTROOMS)



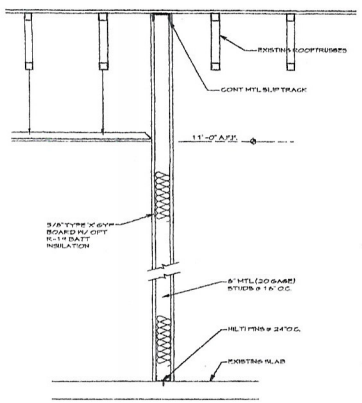
2 HANDICAP BATHROOM ELEVATION
NOT TO SCALE



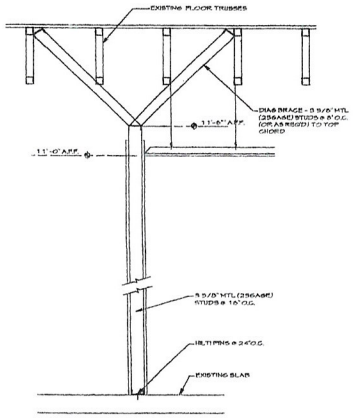
3 WATER CLOSET SIDE VIEW
NOT TO SCALE



4 LEG CLEARANCES
NOT TO SCALE



5 INTERIOR WALL DETAIL
NTS
1 HR EXISTING WALL



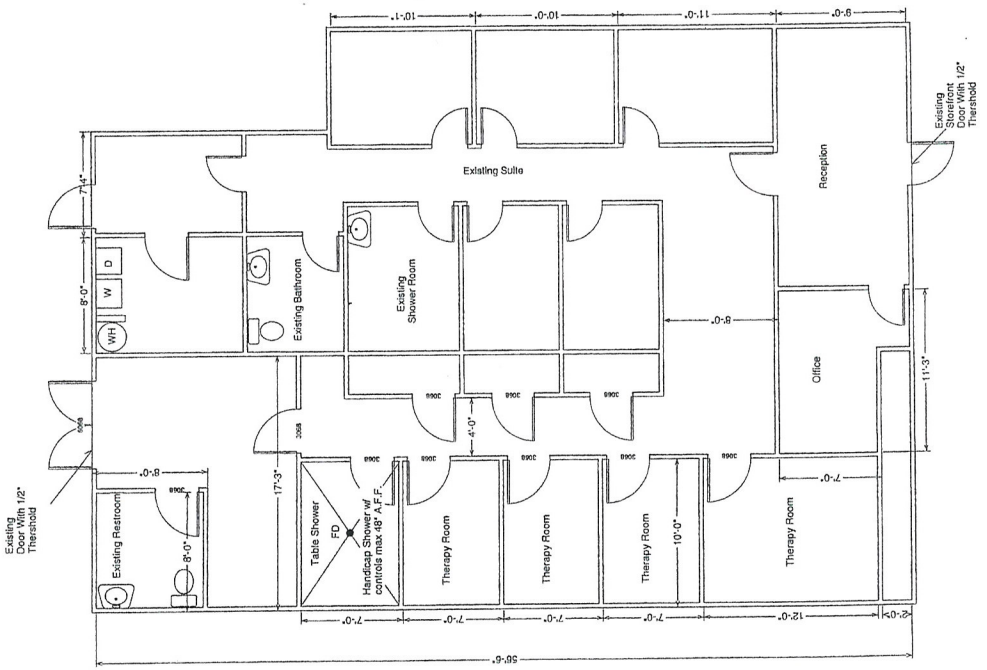
6 INTERIOR WALL DETAIL
NTS

GENERAL NOTES:

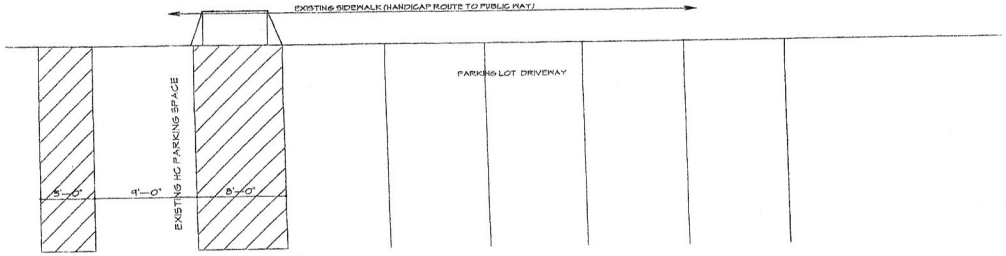
VERIFY ALL FINISHES WITH OWNER PRIOR TO ORDER

INTERIOR NON-BEARING WALLS TO BE:

3 5/8" 25 ga. MTL STUDS @ 24" O.C. WITH 5/8" TYPE X GYP BOARD TO 4" ABOVE GRID (MIN) AND OTHERWISE NOTED
ALL WET AREAS TO HAVE WR GYP BOARD



Floor Plan
Scale 1/4"



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Princess Massage
SITE / FLOOR PLAN

REVISIONS
1 2 3 4

C & L ENTERPRISES
(LIC#60690)
4009 SPRING MOUNTAIN ROAD
LAS VEGAS NV 89102
TLE:702-289-9788
FAX:702-835-8858

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