



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **ZON-40032** APN: 139-34-501-003

Name of Property Owner: City of Las Vegas

Name of Applicant: City of Las Vegas

Name of Representative: N/A

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

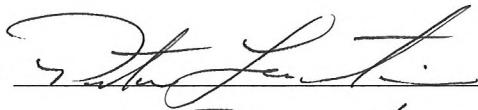
☒ No

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: N/A

Partner(s): N/A N/A

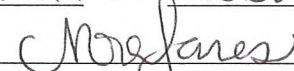
APN: N/A

Signature of Property Owner: 

Print Name: PETER LOWENSTEIN

Subscribed and sworn before me

This 22nd day of October, 20 10


Notary Public in and for said County and State



NOV - 5 2010

PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Rezoning
 Project Address (Location) 400 Stewart Avenue
 Project Name Las Vegas City Hall Proposed Use Office
 Assessor's Parcel #(s) 139-34-501-003 Ward # 5 (Barlow)
 General Plan: existing PF proposed MXU Zoning: existing CV proposed C-2
 Commercial Square Footage N/a Floor Area Ratio N/A
 Gross Acres 6.4 acres Lots/Units 1 Density N/A
 Additional Information To amend the zoning from C-V (Civic) to C-2 (General Commercial)
for the existing City Hall site.

PROPERTY OWNER City of Las Vegas Contact _____
 Address 400 Stewart Avenue Phone: 229-6301 Fax: 474-7463
 City Las Vegas State NV Zip 89101
 E-mail Address _____

APPLICANT City of Las Vegas Contact PETER LOWENSTEIN
 Address 400 Stewart Avenue Phone: 229-6301 Fax: 474-7463
 City Las Vegas State NV Zip 89101
 E-mail Address _____

REPRESENTATIVE _____ Contact _____
 Address _____ Phone: _____ Fax: _____
 City _____ State _____ Zip _____
 E-mail Address _____

Property Owner Signature* [Signature]

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

Print Name PETER LOWENSTEIN

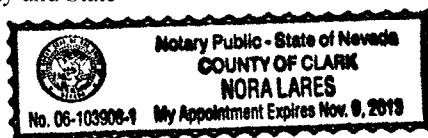
Subscribed and sworn before me

This 22nd day of October, 2010

[Signature]

Notary Public in and for said County and State

Revised 10/27/08



FOR DEPARTMENT USE ONLY

Case #	<u>ZON-40032</u>
Meeting Date:	<u>1/27/11</u>
Total Fee:	<u>\$ 1,200.00</u>
Date Received:*	<u>10/22/10</u>
Received By:	<u>[Signature]</u>

*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.

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

REZONING Parcel: 1139-34-501-003

ZON - 40032



ZONING

C-V	R-MH	R-3	O	C-2
C-PB	R-CL	R-4	C-D	C-M
P-C	R-2	R-5	C-1	M
U	R-D	R-MHP	PD	Subject Parcel
R-A	R-PD	P-R	T-D	City Limits
R-E	R-1	N-S	TC	ROI Zoning

FROM C-V TO C-2



GIS maps are normally produced only to meet the needs of the City. Due to continuous development activity this map is for reference only.
Geographic Information System
Planning & Development Dept.
702-229-6301



Printed: October 26, 2010