



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **EOT-40745** APN: 125-19-201-001+003

Name of Property Owner: Day Star Ventures, LLC

Name of Applicant: Wagner Homes

Name of Representative: Paul Wagner

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): _____

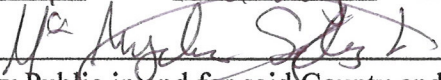
APN: _____

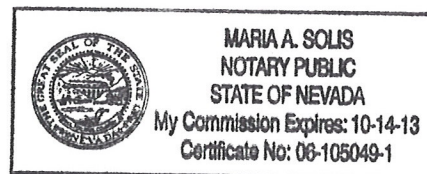
Signature of Property Owner: 

Print Name: Paul Wagner

Subscribed and sworn before me

This 19 day of January, 2011


Notary Public in and for said County and State



PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Extension of Time WVR -22255
 Project Address (Location) Hualapai Way and Dorrell Lane
 Project Name Day Dawn Ridge Proposed Use _____
 Assessor's Parcel #(s) 125-19-201-001 + 003 Ward # 6
 General Plan: existing R proposed _____ Zoning: existing R-PD3 proposed N/A
 Commercial Square Footage N/A Floor Area Ratio N/A
 Gross Acres N/A Lots/Units N/A Density N/A
 Additional Information ZON-4623, SDR-22253, VAR-5377, TMP-24461

PROPERTY OWNER Day Dawn Ventures, LLC Contact Paul Wagner
 Address 6985 W. Sahara Ave, #201 Phone: 702-220-6200 Fax: 702-257-7715
 City Las Vegas State NV Zip 89117
 E-mail Address nhg.paul@yahoo.com

APPLICANT Wagner Homes Contact Paul Wagner
 Address 6985 W. Sahara Ave, #201 Phone: 702-220-6200 Fax: 702-257-7715
 City Las Vegas State NV Zip 89117
 E-mail Address nhg.paul@yahoo.com

REPRESENTATIVE Paul Wagner Contact Paul Wagner
 Address 6985 W. Sahara Ave, #201 Phone: 702-220-6200 Fax: 702-257-7715
 City Las Vegas State NV Zip 89117
 E-mail Address nhg.paul@yahoo.com

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 Paul Wagner

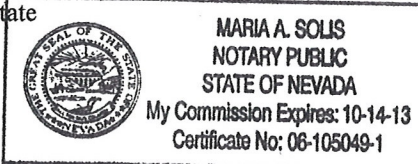
Subscribed and sworn before me

This 19 day of January, 20 11.

[Signature]

Notary Public in and for said County and State

Revised 10/27/08

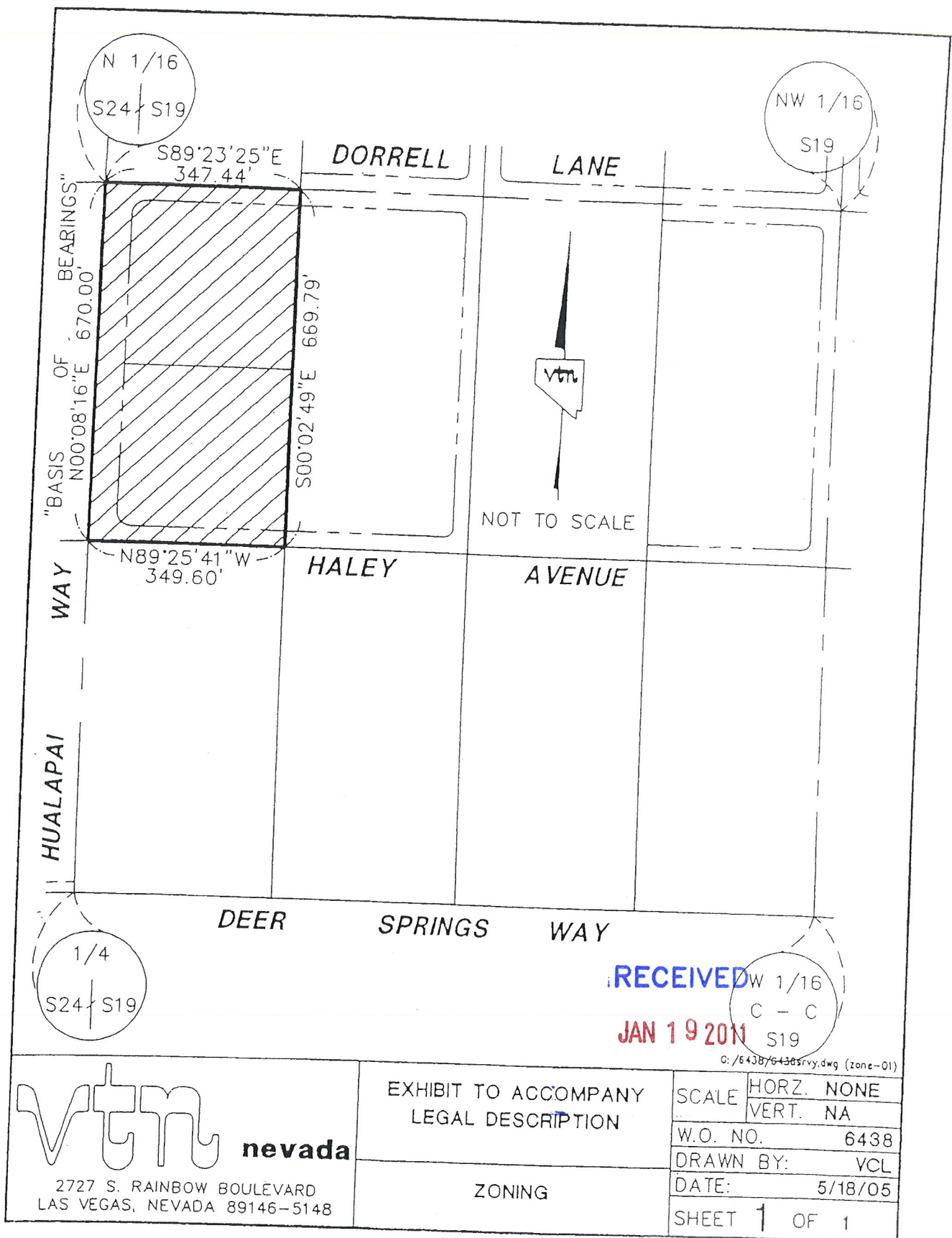


FOR DEPARTMENT USE ONLY

Case #	<u>EOT-40745</u>
Meeting Date:	<u>3-2-11</u>
Total Fee:	<u>300 -</u>
Date Received:*	<u>1-19-11</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



Vtn nevada
 2727 S. RAINBOW BOULEVARD
 LAS VEGAS, NEVADA 89146-5148

EXHIBIT TO ACCOMPANY LEGAL DESCRIPTION	SCALE	HORZ. NONE
		VERT. NA
ZONING	W.O. NO.	6438
	DRAWN BY:	VCL
	DATE:	5/18/05
SHEET 1 OF 1		

EOT-40745

PROJECT NO. _____ CHECKED BY _____ DATE _____		DAY DAWN RIDGE II TENTATIVE MAP	
DRAWN BY _____ DATE _____		NEVADA HOMES GROUP QTY OF LAS VEGAS	
SCALE: 1" = 40' HORIZ. 1" = 10' VERT.		CONSULTING CIVIL ENGINEER & ARCHITECT 1000 S. LAS VEGAS BLVD., SUITE 100 LAS VEGAS, NEVADA 89101 (702) 735-1000	

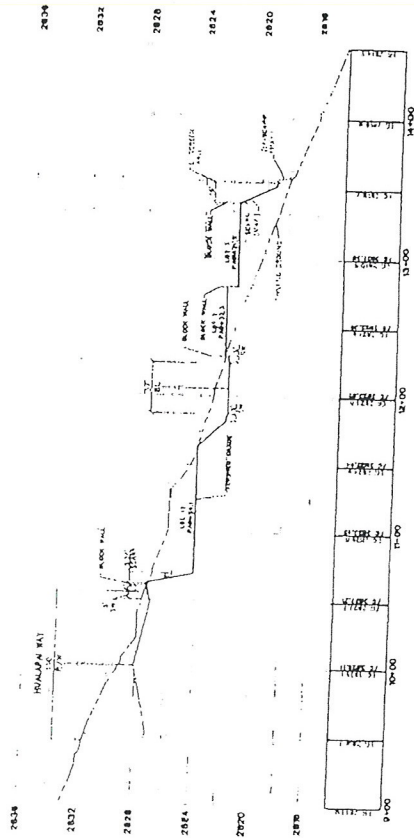


RECEIVED

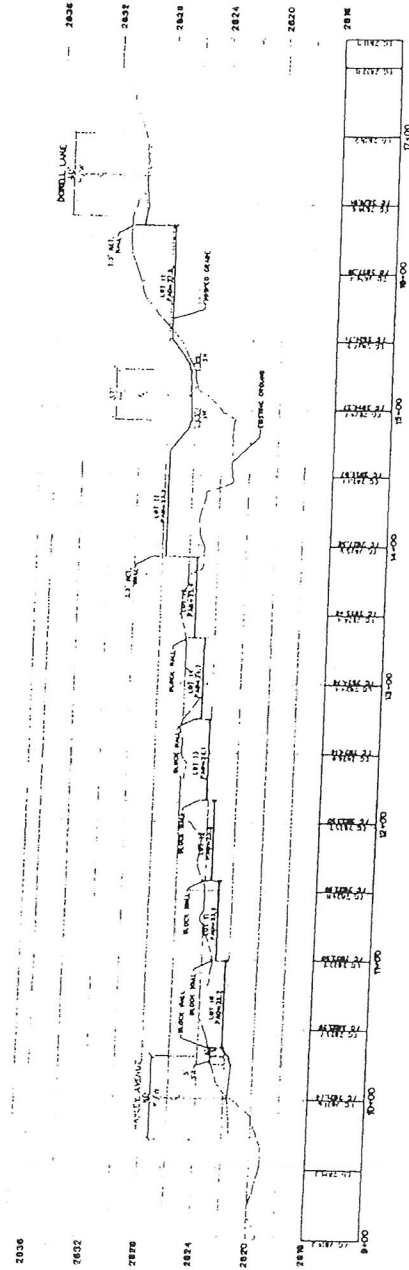
JAN 19 2011

EOT-40745

CROSS SECTION B



RECEIVED



EOT-40745

PROJECT NO. _____ CHECKED BY _____ DESIGNED BY _____ DATE _____	TENTATIVE MAP CROSS SECTIONS DAY DOWN RIDGE II	NEVADA HOMES GROUP 1000 N. 10TH STREET, SUITE 100 LAS VEGAS, NEVADA 89101 (702) 735-1111 FAX (702) 735-1112 E-MAIL: INFO@NEVADAHOMES.COM	CONSULTING 1000 N. 10TH STREET, SUITE 100 LAS VEGAS, NEVADA 89101 (702) 735-1111 FAX (702) 735-1112 E-MAIL: INFO@NEVADAHOMES.COM	DATE: _____ DRAWN BY: _____ CHECKED BY: _____ DESIGNED BY: _____		SHEET NO. _____ OF _____ TOTAL SHEETS _____
						DATE: _____ DRAWN BY: _____ CHECKED BY: _____ DESIGNED BY: _____