



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **ROC-41050** APN: _____

Name of Property Owner: TOFFY ENTERPRISES, LLC

Name of Applicant: BROWNMAIL, INC.

Name of Representative: NICK SWATCH

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

X 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): _____

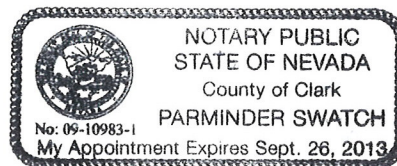
APN: _____

Signature of Property Owner: Dorothy Panser

Print Name: DOROTHY PANSER

Subscribed and sworn before me

This 23RD day of FEBRUARY, 2011
in County of CLARK, NV.
 Notary Public in and for said County and State



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 FEB 24 2011



PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: BROWN MAIL, INC.
 Project Address (Location) 8251 W. Charleston Las Vegas NV 89117
 Project Name _____ Proposed Use SINGLE CAN SALE.
 Assessor's Parcel #(s) 163-04-117-003 Ward # _____
 General Plan: existing ☒ proposed _____ Zoning: existing ☒ proposed _____
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres _____ Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER JOEY ENTERPRISES Contact DOROTHY PANSEK
 Address PO Box 34060, LV 89133 Phone: 228-3345 Fax: 228-3345
 City LAS VEGAS State NV Zip 89133
 E-mail Address dpanserk@gmail.com

APPLICANT BROWNMAIL, INC. Contact HARRY MANGAT
 Address 8251 W. CHARLESTON BLVD Phone: 7023026443 Fax: _____
 City LAS VEGAS State NV Zip 89117
 E-mail Address _____

REPRESENTATIVE NICK ~~TO~~ SWATCH Contact _____
 Address 8251 W. CHARLESTON BLVD Phone: 7023026443 Fax: _____
 City LAS VEGAS State NV Zip 89117
 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.

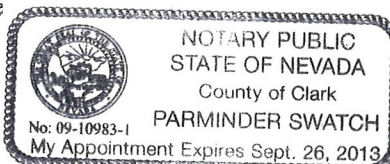
Print Name DOROTHY PANSEK

Subscribed and sworn before me

This 23RD day of FEBRUARY, 20 11
 in CLARK COUNTY, NV

Notary Public in and for said County and State

Revised 10/27/08



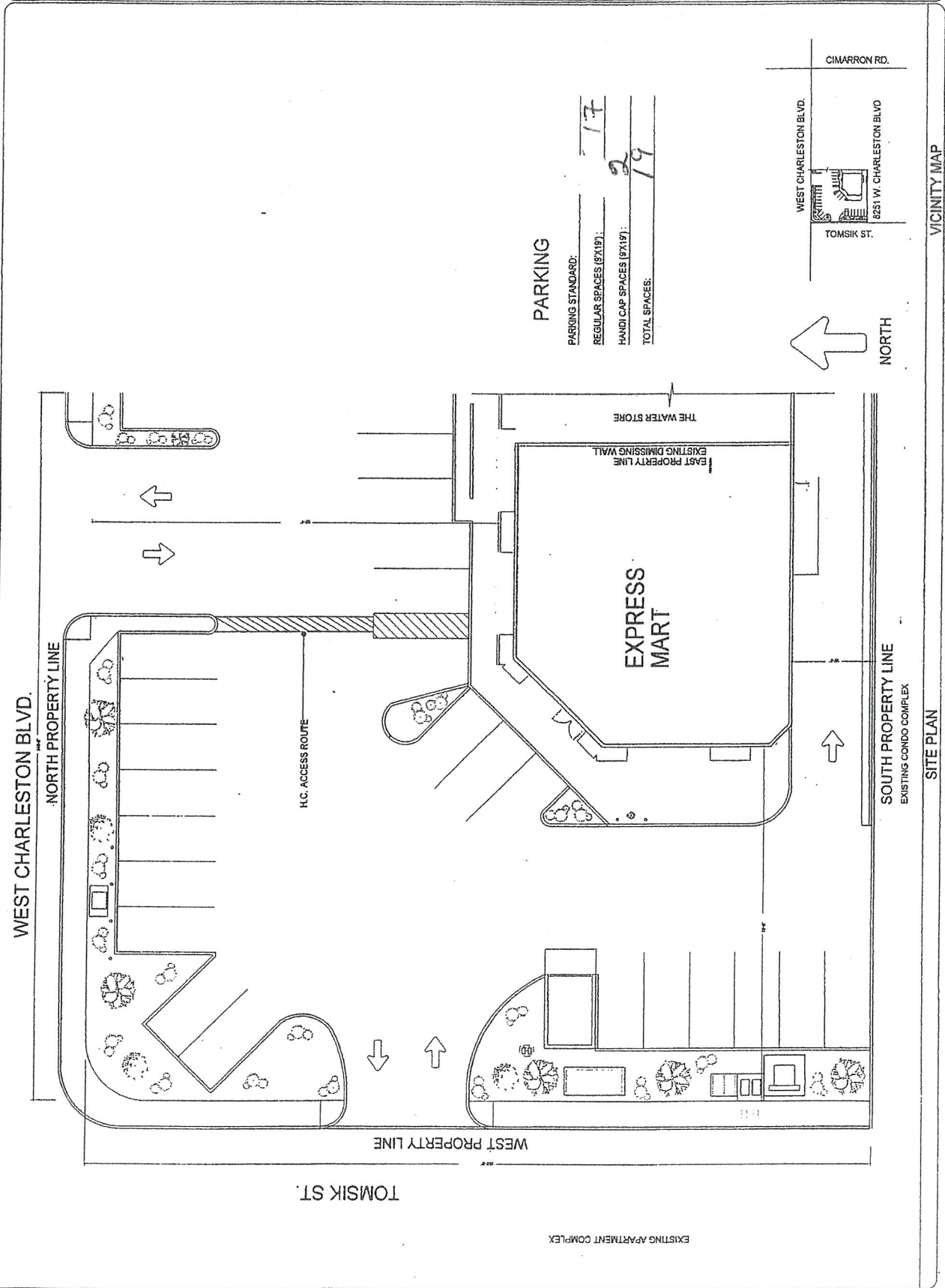
FOR DEPARTMENT USE ONLY

Case # LOC-41050
 Meeting Date: 4/6/11
 Total Fee: \$1,080
 Date Accepted: 2/24/11
 Accepted By: Bins

*The application will not be deemed complete until the submitted materials have been reviewed by the Planning and Development for consistency with applicable sections for the Zoning Ordinance.

Depot Application Packet Application Form.doc

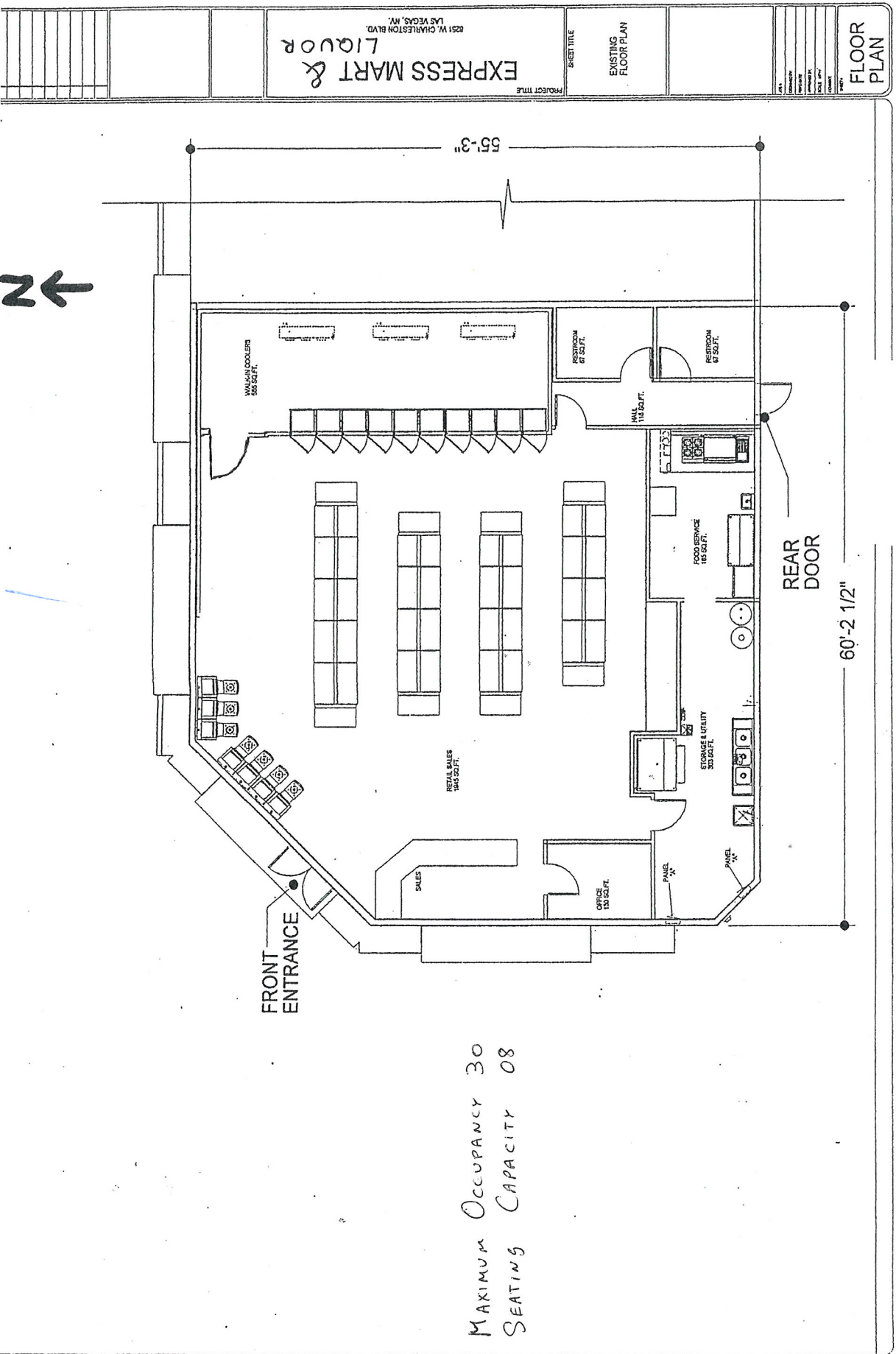
REVISIONS DATE DESCRIPTION		PROJECT TITLE EXPRESS MART & LIAVOR 8251 W. CHARLESTON BLVD. LAS VEGAS, NV.		SHEET TITLE SITE PLAN		SITE DATE DRAWN BY CHECKED BY PROJECT NO.	
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