DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **EOT-41219** APN: 139-35-803-005

Name of Property Owner: Fremont Properties, LLC

Name of Applicant: John Wolfson

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: _____

Partner(s): _____ _____

APN: _____

Signature of Property Owner: John Wolfson

Print Name: John Wolfson

Subscribed and sworn before me

This 15th day of March, 2011

Harpreet Kaur Santa Clara, CA

Notary Public in and for said County and State

HARPREET KAUR
COMM. # 1910425
NOTARY PUBLIC - CALIFORNIA
SANTA CLARA COUNTY
My Comm. Expires Oct. 25, 2014

RECEIVED
MAR 16 2011

DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Extension of Time

Project Address (Location) 1930 Fremont St, Las Vegas, NV 89101

Project Name Odyssey Tavern **Proposed Use** Liquor Establishment

Assessor's Parcel #(s) 139-35-803-005 **Ward #** 3

General Plan: existing MXU proposed _____ **Zoning:** existing C-2 proposed _____

Commercial Square Footage 3500 **Floor Area Ratio** _____

Gross Acres 0.66 **Lots/Units** _____ **Density** _____

Additional Information _____

PROPERTY OWNER Fremont Properties, LLC **Contact** John Wolfson

Address PO Box 41134 **Phone:** (408) 203-1971 **Fax:** (408) 268-4254

City San Jose **State** CA **Zip** 95160

E-mail Address jwolfson@hotmail.com and john.wolfson@gmail.com

APPLICANT Same As Above **Contact** _____

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

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

E-mail Address _____

REPRESENTATIVE _____ **Contact** _____

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

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

E-mail Address _____

Property Owner Signature* John Wolfson

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

Print Name John Wolfson

Subscribed and sworn before me

This 15th day of March, 20 11.

Harpreet Kaur

Harpreet Kaur, Santa Clara, CA

Notary Public in and for said County and State

HARPREET KAUR
COMM. # 1910425
NOTARY PUBLIC - CALIFORNIA
SANTA CLARA COUNTY
My Comm. Expires Oct. 25, 2014

Revised 10/27/08

FOR DEPARTMENT USE ONLY

Case #	EOT-41219
Meeting Date:	5/4/11 PRCC
Total Fee:	$800
Date Received:*	3/16/11
Received By:	

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

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MAR 16 2011

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