



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: SUP-41267 APN: 139-35-501-001

Name of Property Owner: C Eagle Spirit, LLC

Name of Applicant: Koster Finance, LLC

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: _____

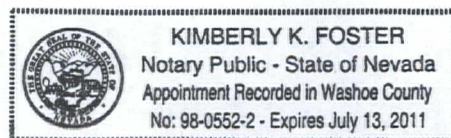
Signature of Property Owner: _____

State of Nevada
County of Washoe
Subscribed and sworn before me

Print Name: _____

MARY Connolly

This 20th day of April, 2011, by
xx Mary Elizabeth Connolly. xx
Kimberly K. Foster
Notary Public in and for said County and State





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Special Use Permit
Project Address (Location) 2300 E. Bonanza Rd.
Project Name Koster's Cash Loans #E Proposed Use Title Loan
Assessor's Parcel #(s) 139-35-501-001 Ward # 3 - Reece
General Plan: existing SC proposed SC Zoning: existing C-1 proposed C-1
Commercial Square Footage 4845 Floor Area Ratio _____
Gross Acres 8.77 acres Lots/Units _____ Density _____
Additional Information _____

PROPERTY OWNER C Eagle Spirit, LLC Contact Connolly Properties
Address 3212 Jefferson St., Suite 414 Phone: (702) 455-1081 Fax: (702) 451-4522
City Napa State CA Zip 94558
E-mail Address _____

APPLICANT Koster Finance, LLC Contact Paul M. Smith
Address 4170 S. Decatur Blvd., Suite B-5 Phone: NV Fax: (702) 247-9687
City Las Vegas State NV Zip 89103
E-mail Address PSmith@KosterFinance.com

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

Property Owner Signature* Mary Connolly

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

Print Name Mary Connolly

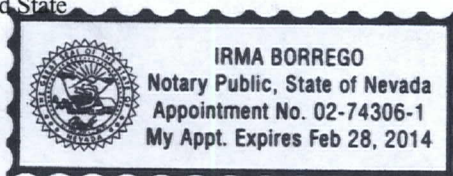
Subscribed and sworn before me

This 21st day of April, 20 11

Irma Borrego

Notary Public in and for said County and State

Revised 10/27/08



FOR DEPARTMENT USE ONLY

Case #	<u>SUP-41267</u>
Meeting Date:	<u>5/10/11</u>
Total Fee:	<u>\$11,030.00</u>
Date Received:*	<u>4/21/11</u>
Received By:	<u>[Signature]</u>

*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.

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



1. ALL DIMENSIONS SHOWN ON THIS DRAWING SHOULD BE CHECKED/VERIFIED PRIOR TO THE ORDERING OF ANY MATERIALS AND PRIOR TO THE FABRICATION AND INSTALLATION OF ANY MATERIALS.

2. THESE DRAWINGS WERE PREPARED WITHOUT THE BENEFIT OF A FULL SET OF ARCHITECTURAL DRAWINGS. SOME PERMETER CONDITIONS MAY BE SHOWN AS UNKNOWN. THESE CONDITIONS SHOULD BE VERIFIED PRIOR TO FABRICATION AND INSTALLATION FOR THEIR EFFECT ON THE WORK BEING PERFORMED.

3. THESE DRAWINGS WERE PREPARED WITHOUT THE BENEFIT OF STRUCTURAL DRAWINGS. THIS MAY AFFECT THE LOCATION AND SIZING OF THE STRUCTURAL LAYOUT IN THESE AREAS SHOULD BE VERIFIED PRIOR TO FABRICATION AND INSTALLATION OF THE WORK.

[illegible]

THE CONTRACTOR SHALL BE RESPONSIBLE FOR REVIEWING ALL EXISTING JOB CONDITIONS. ANY ADVERSE EXISTING CONDITIONS AFFECTING WORK SHOWN ON THESE DRAWINGS SHALL BE BROUGHT TO THE ATTENTION THE CLIENT AND IDEAL SOLUTIONS FOR POSSIBLE CLARIFICATION OR RECONCILIATION.

THIS DOCUMENT IS NOT REPRESENTED TO COMPLY WITH ALL REQUIREMENTS CONTAINED IN THE ADA OR OTHER LAWS. IDEAL SOLUTIONS IS NOT LICENSED TO INTERPRET LAWS OR GIVE ADVICE CONCERNING LAWS. THE OWNER SHOULD HAVE THIS DOCUMENT REVIEWED BY HIS ATTORNEY TO DETERMINE LEGAL COMPLIANCE.

CONTRACTOR'S NOTE
EXISTING POWER AND UTILITY LOCATIONS SHOWN HEREIN ARE APPROXIMATE ONLY. IT SHALL BE THE CONTRACTOR'S RESPONSIBILITY TO DETERMINE THE EXACT VERTICAL AND HORIZONTAL LOCATION OF ALL EXISTING POWER AND UTILITIES PRIOR TO COMMENCING CONSTRUCTION. NO REPRESENTATION IS MADE THAT ALL EXISTING UTILITIES ARE SHOWN HEREIN. IDEAL SOLUTIONS ASSUMES NO RESPONSIBILITY FOR POWER AND UTILITIES NOT SHOWN OR POWER AND UTILITIES NOT SHOWN IN THEIR PROPER LOCATIONS.



	EX. FIRE EXTINGUISHER		EX. WATER TAP
	EX. TO BE REMOVED		EX. PROPOSED
	EX. STANDARD OUTLET		EX. GFI OUTLET
	EX. 125V 30A OUTLET		EX. FOUR PLEX OUTLET
	EX. JUNCTION BOX		EX. OUTLET
	EX. DATA JACK		EX. TELEPHONE JACK
	EX. TELEVISION JACK		EX. SINGLE SWITCH
	EX. EXHAUSTING DOOR		EX. EXHAUSTING TOILET
	EX. EXHAUSTING WALL		EX. EXHAUSTING WINDOW

- ① EXISTING INTERIOR WALL
- ② EXISTING EXTERIOR WALL
- ③ EXISTING WINDOW
- ④ EXISTING SLIDING GLASS DOOR
- ⑤ EXISTING STANDARD DOOR
- ⑥ EXISTING PROCKET DOOR

	DOOR	OPENING	SM	SIMILAR	'SPAND REL INSUL INSULATION
REQUIRED	VER	PID	PAINTED		
WATER PROOF	GROSSIE	WC	WATER CLOSET		
BY OTHERS	WH	WATERS HEATER			
FIELD VERIFY	WINDOW				
ANGLE	EA	EACH			
DHT	SHEET	FLOOR			
JTL DETAIL	EXT	EXTERIOR			
ELEVATION	INT	INTERIOR			
SUBJECT					
SLURF					
SHIELD					

NAME	SQUARE FOOTAGE	USAGE
FRONT ROOM	2144.69	X
BACK ROOM	1272.53	X
STORAGE ROOM	155.16	X
MENS BATHROOM	105.87	X
WOMENS BATHROOM	123.13	X
WALL	464.15	X
STORAGE ROOM	300.85	
TOTAL OVERALL INTERIOR SQUARE FOOTAGE:		4,617.36
TOTAL OVERALL EXTERIOR SQUARE FOOTAGE:		4,884.00

RECEIVED
MAR 23 2011

PARCEL NUMBER: 13935501001
OWNER NAME: C EAGLE SPIRIT LLC
SITE ADDRESS: 2300 BONANZA LAS VEGAS, NV 89101
ZONING: (C-1) LIMITED COMMERCIAL DISTRICT
ESTIMATED INTERIOR SQUARE FOOTAGE: 3,776.78 SQ.FT.

SUP-41267