DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **ROC-41544** APN: 138-34-402-001

Name of Property Owner: 7185 W CHARLESTON LLC

Name of Applicant: FIESTA DISCOUNT MARKET

Name of Representative: LUKE JOSEPH

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: (X) _____

Print Name: FRANK P. GATSKI

Subscribed and sworn before me

This 25 day of APRIL, 20 11

_____

Notary Public in and for said County and State

LUKE A. JOSEPH
Notary Public State of Nevada
No. 07-4572-1
My appt. exp. Aug. 20, 2011

RECEIVED
APR 25 2011
City of Las Vegas

DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: FIESTA DISCOUNT MARKET

Project Address (Location) 7010 W CHARLESTON BLVD

Project Name FIESTA DISCOUNT MARKET **Proposed Use**

Assessor's Parcel #(s) 138-34-402-001 **Ward #** 1

General Plan: existing _____ proposed _____ **Zoning:** existing C-1 proposed _____

Commercial Square Footage 1664 **Floor Area Ratio** _____

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

Additional Information _____

PROPERTY OWNER G.I. DAY DONALD IRR FAM TRUST **Contact** FRANK GATSKI

Address 7006 W CHARLESTON **Phone:** 702-221-8226 **Fax:** _____

City LAS VEGAS **State** NV **Zip** 89117

E-mail Address _____

APPLICANT FIEST DISCOUNT MARKET **Contact** FRED SLEMAN

Address 7010 W. CHARLESTON **Phone:** _____ **Fax:** _____

City LAS VEGAS **State** NV **Zip** 89117

E-mail Address _____

REPRESENTATIVE LUKE JOSEPH **Contact** _____

Address 2550 S. RAINBOW BLVD STE E15 **Phone:** 702-283-6386 **Fax:** _____

City LAS VEGAS **State** NV **Zip** 89146

E-mail Address _____

Property Owner Signature* _____

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

Print Name FRANK P. GATSKI

Subscribed and sworn before me

This 25 day of APRIL, 20 11.

_____

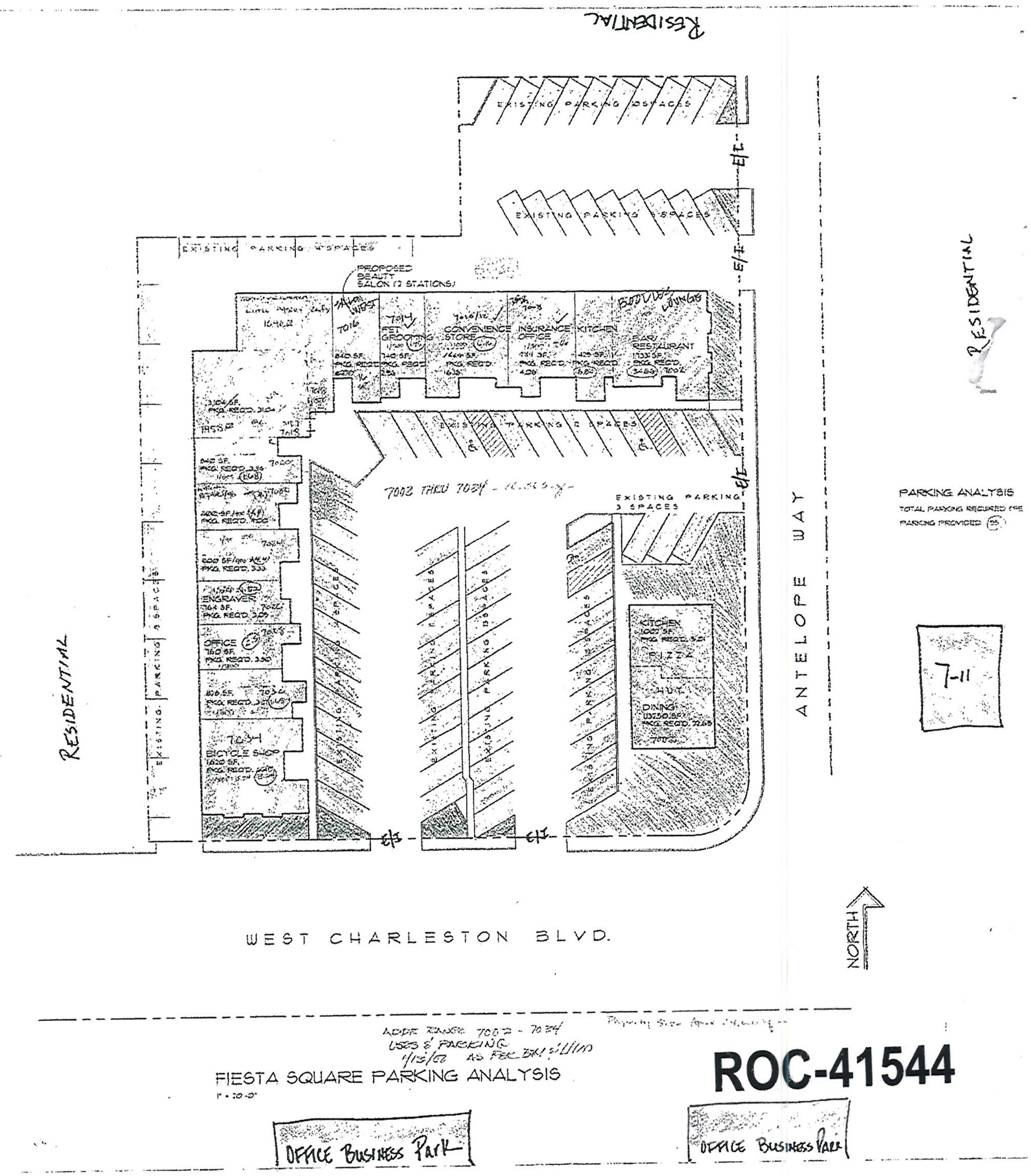
Notary Public in and for said County and State

LUKE A. JOSEPH
Notary Public State of Nevada
No. 07-4572-1
My appt. exp. Aug. 20, 2011

FOR DEPARTMENT USE ONLY

Case #	ROC-41544
Meeting Date:	6-13-11
Total Fee:	1080.00
Date Accepted:	4-25-11
Accepted By:	PS

*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.



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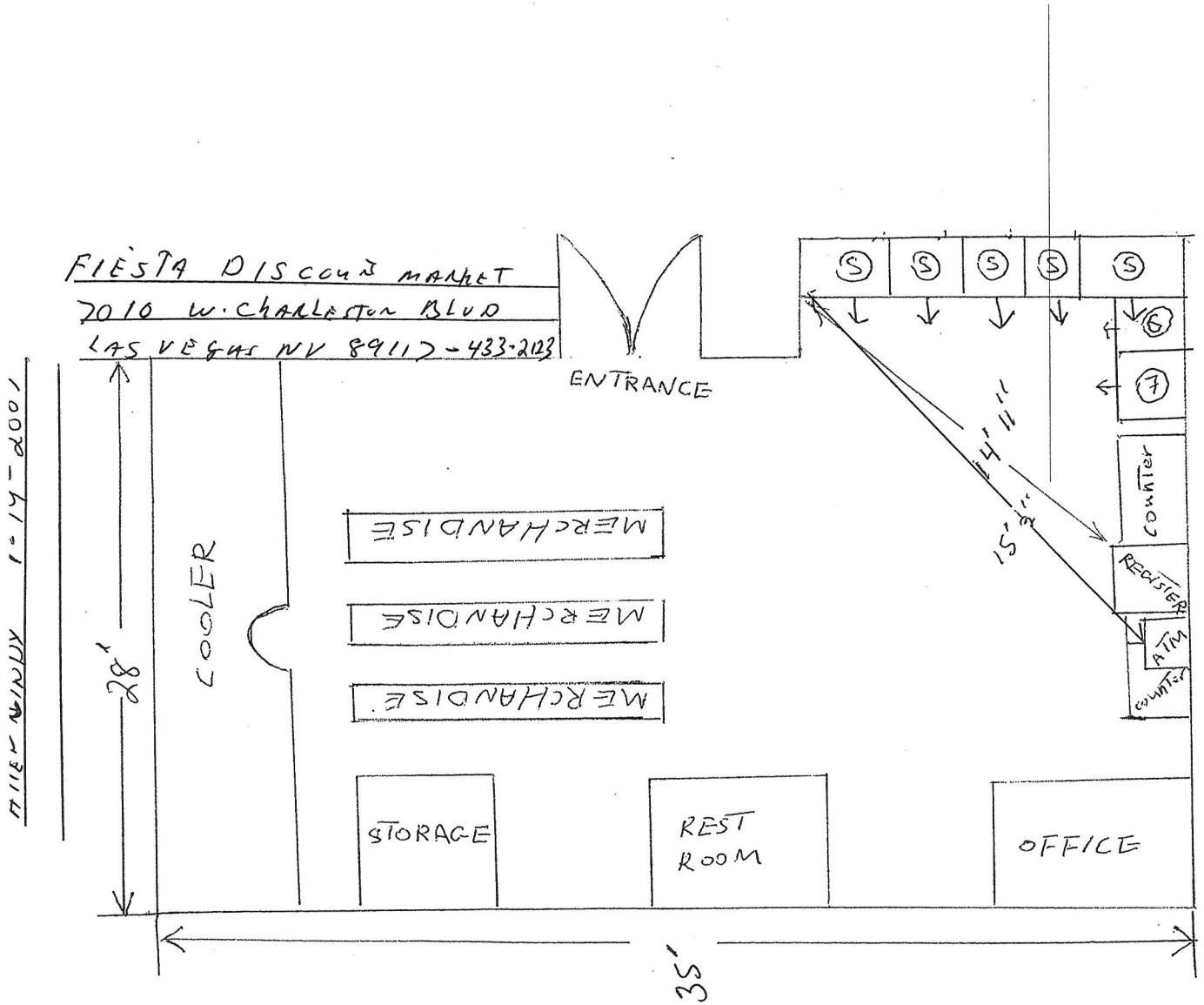

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