



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-41569** APN: _____

Name of Property Owner: HS FAMILY LP Y HSCHMIOT

Name of Applicant: Haim Gabay

Name of Representative: Nieves Alvarez

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: Vern J Christensen

Subscribed and sworn before me

This 20th day of April, 2011

Shari High
Notary Public in and for said County and State



RECEIVED
APR 27 2011

City of Las Vegas



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Crazy Ely Western Village DBA COYOTE
 Project Address (Location) 316 Fremont st. L.V. NV. 89101
 Project Name COYOTE Proposed Use Beer/wine/cooler off sale
 Assessor's Parcel #(s) 139-34-510-025 Ward # 5
 General Plan: existing C proposed - Zoning: existing C2 proposed -
 Commercial Square Footage 6500 Floor Area Ratio 5500
 Gross Acres 0.14 Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER HS FAMILY LPY HSCMIOT Contact _____
 Address 714 Lacy LN Phone: _____ Fax: _____
 City Las Vegas NV State NV Zip 89102
 E-mail Address _____

APPLICANT HAIM GABAY Contact _____
 Address 6130 W. FLAMINGO RD #402 Phone: (702) 382-3005 Fax: (702) 382-7005
 City LAS VEGAS State NV Zip 89103
 E-mail Address haimgabay@hotmail.com

REPRESENTATIVE Nieves Alvarez Contact _____
 Address 2700 Trotwood LN Phone: (702) 257-2048 Fax: 382-7005
 City Las Vegas State NV Zip 89108
 E-mail Address western321@hotmail.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 Vern J Christensen

Subscribed and sworn before me

This 20th day of April, 20 11.

[Signature]

Notary Public in and for said County and State

Notary Public, State of Nevada
 Appointment No. 05-97773-1
 My Appt. Expires June 6, 2013

Revised 10/27/08

FOR DEPARTMENT USE ONLY

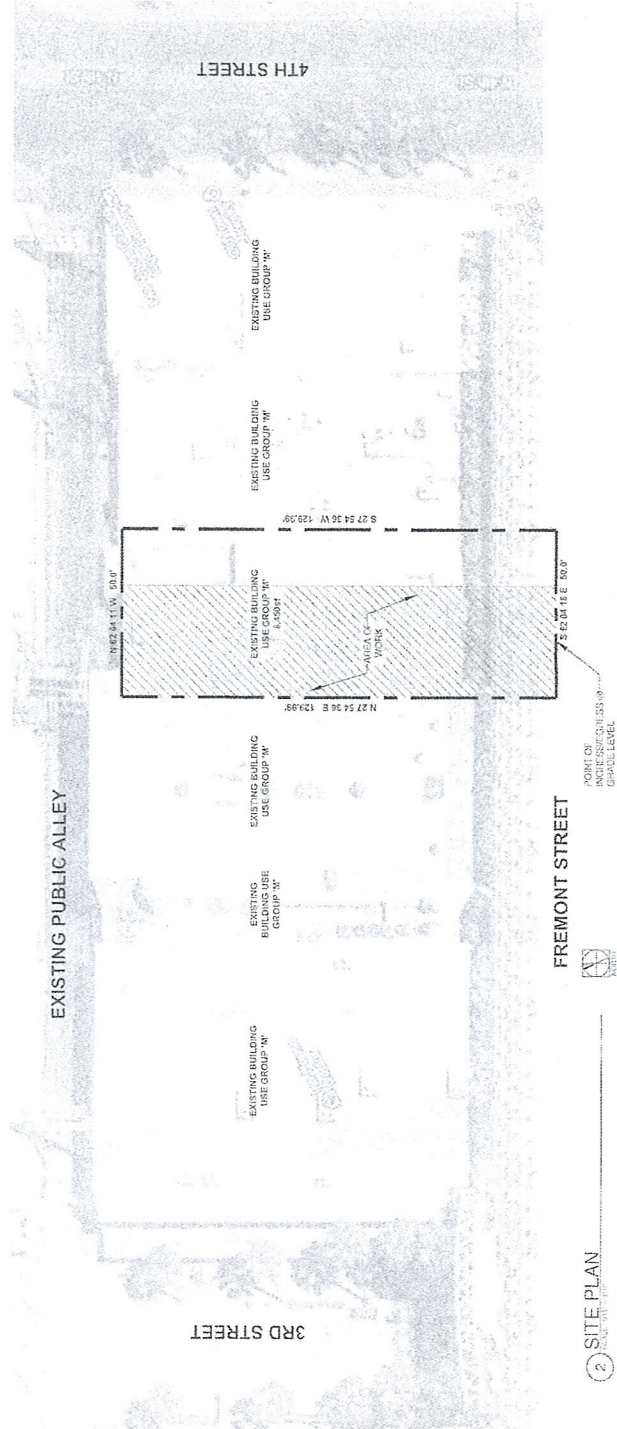
Case #	<u>SUP-41569</u>
Meeting Date:	<u>6-14-11</u>
Total Fee:	<u>1280</u>
Date Received:*	<u>4-27-11</u>
Received By:	<u>KS</u>

*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.

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① VICINITY MAP



2 SITE PLAN

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