



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **GPA-37216** APN: N/A

Name of Property Owner: City of Las Vegas

Name of Applicant: City of Las Vegas

Name of Representative: Flinn Fagg, AICP

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: *Flinn Fagg*

Print Name: Flinn Fagg



Subscribed and sworn before me

This 19th day of January, 2010

Teresa K. Morrell

Notary Public in and for said County and State



PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: General Plan Amendment
 Project Address (Location) Citywide
 Project Name Safety & Seismic Safety Element Proposed Use N/A
 Assessor's Parcel #(s) N/A Ward # All
 General Plan: existing N/A proposed N/A Zoning: existing N/A proposed N/A
 Commercial Square Footage N/A Floor Area Ratio N/A
 Gross Acres N/A Lots/Units N/A Density N/A
 Additional Information _____

PROPERTY OWNER City of Las Vegas Contact Flinn Fagg, AICP
 Address 731 S. Fourth Street Phone: (702) 229-4848 Fax: _____
 City Las Vegas State NV Zip 89101
 E-mail Address ffagg@lasvegasnevada.gov

APPLICANT City of Las Vegas Contact Flinn Fagg, AICP
 Address 731 S. Fourth Street Phone: (702) 229-4848 Fax: _____
 City Las Vegas State NV Zip 89101
 E-mail Address ffagg@lasvegasnevada.gov

REPRESENTATIVE _____ Contact _____
 Address _____ Phone: _____ Fax: _____
 City _____ State _____ Zip _____
 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 Flinn Fagg

Subscribed and sworn before me

This 19th day of January, 20 10

Teresa K. Morrell

Notary Public in and for said County and State

Revised 10/27/08



FOR DEPARTMENT USE ONLY

Case #
Meeting Date:
Total Fee:
Date Received:*
Received By:

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

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