



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-37885** *A portion of* APN: *139-34-611-008*
Name of Property Owner: *HAM A W III Trust (Artemus Ham III)*
Name of Applicant: *Vanguard Lounge, LLC*
Name of Representative: *Jennifer Wheatley*

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: _____

Subscribed and sworn before me

This *7th* day of *APRIL*, 20*10*

Notary Public in and for said County and State



PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Special use permit
 Project Address (Location) 516 Fremont Street
 Project Name Vanguard Lounge Proposed Use Bar
 Assessor's Parcel #(s) 139-34-611-008 Ward # 5
 General Plan: existing C proposed _____ Zoning: existing C-2 proposed _____
 Commercial Square Footage 2,416 Floor Area Ratio _____
 Gross Acres .13 Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER AW Ham III Trust Contact _____
 Address 2008 GRAY EAGLE WAY, #100 Phone: 732-8334 Fax: _____
 City LAS VEGAS State NEVADA Zip 89117
 E-mail Address _____

APPLICANT Vanguard Lounge, LLC Contact Jennifer Wheatley
 Address 2637 Starfish Ct. Phone: 702-419-6339 Fax: _____
 City Las Vegas State NEVADA Zip 89128
 E-mail Address Jennifer@wheatleyenterprises.org

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

Property Owner Signature* A.W. Ham III, Trustee

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

Print Name ARTEMUS W. HAM III, TRUSTEE

Subscribed and sworn before me

This 7th day of APRIL, 20 10

Jana Shore

Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case #	<u>SWP 37885</u>
Meeting Date:	<u>5.27.10</u>
Total Fee:	<u>\$1,200.-</u>
Date Received:*	<u>4.7.10</u>
Received By:	<u>JFA</u>

*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.

EX-103 MAY 05 2010
LVL 2 PLAN

