



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **GPA-38579** APN: 138-11-406-012

Name of Property Owner: PAITAKA P. MIYAHIRA

Name of Applicant: PAITAKA P. MIYAHIRA or Tasey Miyahira

Name of Representative: Paitaka Miyahira, Geoff Robins

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): _____

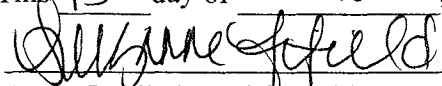
APN: _____

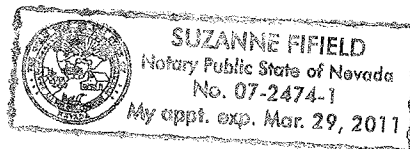
Signature of Property Owner: 

Print Name: PAITAKA P. MIYAHIRA

Subscribed and sworn before me

This 15th day of June, 2010


Notary Public in and for said County and State



RECEIVED
JUN 15 2010

PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: GENERAL PLAN AMENDMENT
 Project Address (Location) 6640 W. CHEYENNE
 Project Name OHANA (FAMILY) CARE MANOR Proposed Use GROUP CARE
 Assessor's Parcel #(s) 138-11-400-012 Ward # 4
 General Plan: existing DR proposed C1 Zoning: existing _____ proposed _____
 Commercial Square Footage 22,314 Floor Area Ratio 48%
 Gross Acres 1.057 Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER P&S MIYAHIRA Contact PAT MIYAHIRA
 Address 6640 W. CHEYENNE Phone: 289 1743 Fax: 645 7093
 City LAS VEGAS State NEVADA Zip 89106
 E-mail Address SUZY@MAUIONEINC.COM

APPLICANT PAITAKA MIYAHIRA Contact PAT MIYAHIRA
 Address 6640 W. CHEYENNE Phone: 289 1748 Fax: 645 7093
 City LAS VEGAS State NEVADA Zip 89105
 E-mail Address SUZY@MAUIONEINC.COM

REPRESENTATIVE GEOFF ROBINS Contact GEOFF ROBINS
 Address 2261 ROSAMUND ST Phone: 376 2558 Fax: 228 4672
 City LAS VEGAS State NEVADA Zip 89117
 E-mail Address _____

Property Owner Signature* Tasey Miyahira

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

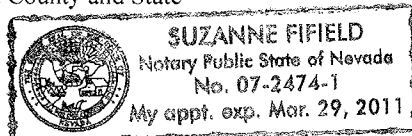
Print Name Tasey Miyahira Paitaka P. Miyahira

Subscribed and sworn before me

This 10th day of JUNE, 20 10

Suzanne Fifeild

Notary Public in and for said County and State



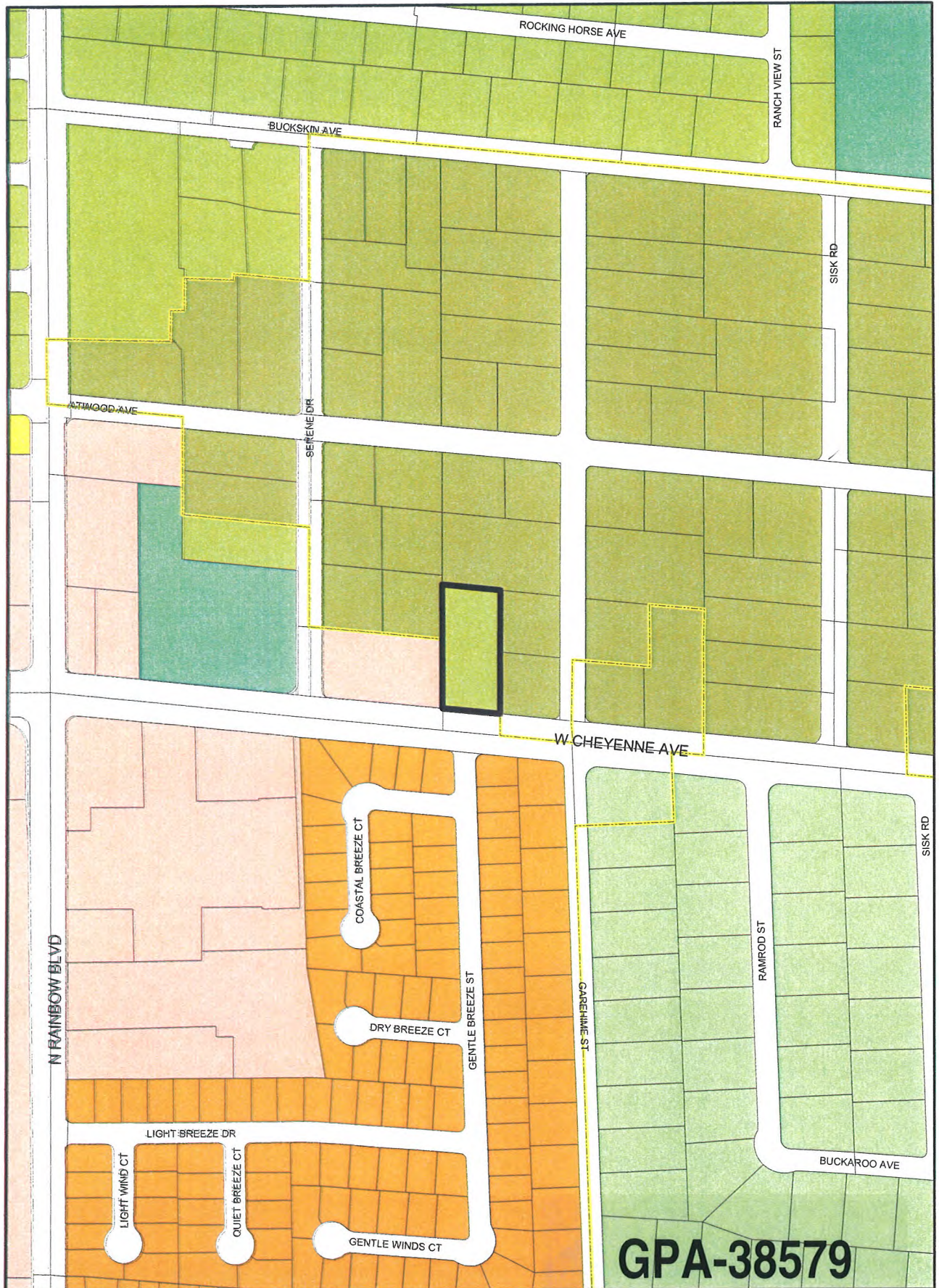
Revised 10/27/08

FOR DEPARTMENT USE ONLY

Case #	<u>GPA-38579</u>
Meeting Date:	<u>7/29/10</u>
Total Fee:	<u>\$2,000</u>
Date Received:*	<u>6/15/10</u>
Received By:	<u>[Signature]</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.

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



Rural Neighborhood Preservation	Medium	Light Industrial / Research	Town Center
Rural Estates	High	Planned Community Development	Resource Conservation
Desert Rural	Office	Downtown Redevelopment Area	Downtown - Commercial
Rural	Medium Commercial	Park / Recreation / Open Space	Downtown - Mixed Use
Low	General Commercial	Public Facility	Not in City
Medium - Low	Tourist Commercial	Public Facility - School	Subject Parcel
Medium - Low Attached	Las Vegas Medical District	Public Facility - Clark County	City Limits

RECEIVED

From DR TO SC
JUN 15 2010 Data Current as of: June 10, 2010



GIS maps are normally produced only to meet the needs of the City. Due to continuous development activity this map is for reference only. Geographic Information System Planning & Development Dept 702-259-6301

