



PLANNING & DEVELOPMENT DEPARTMENT

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-38866** APN: 163-08-121-019

Name of Property Owner: ROBIN D. LOBATO

Name of Applicant: Leslee Wilburn

Name of Representative: Leslee Wilburn

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: _____

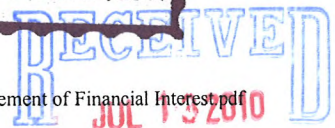
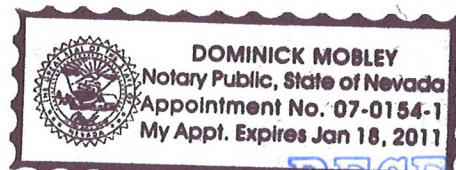
Signature of Property Owner: [Signature]

Print Name: ROBIN D. LOBATO

Subscribed and sworn before me

This 13th day of July, 2010

[Signature]
Notary Public in and for said County and State



PLANNING & DEVELOPMENT DEPARTMENT

APPLICATION / PETITION FORM

Application/Petition For: Special Use Permit
 Project Address (Location) 9061 W. Sahara Ave. Ste. 104 LV NV 89117
 Project Name Man Massage Studio Proposed Use Massage establishment
 Assessor's Parcel #(s) 163-08-121-019 Ward # 2
 General Plan: existing SC proposed _____ Zoning: existing C-1 proposed _____
 Commercial Square Footage 750 sq ft. Floor Area Ratio _____
 Gross Acres _____ Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER LUKE - LOBATO LLC Contact ROBIN LOBATO
 Address 9061 W. Sahara Ste 104 Phone: 877-0500 Fax: 877-9291
 City LV State NV Zip 89117
 E-mail Address drlobato@drlobato.com

APPLICANT Leslee Wilburn Contact 702-612-2008
 Address 8455 W. Sahara #233 Phone: _____ Fax: _____
 City LV State NV Zip 89117
 E-mail Address lesleewilburn@hotmail.com

REPRESENTATIVE _____ Contact _____
 Address Same as above 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.

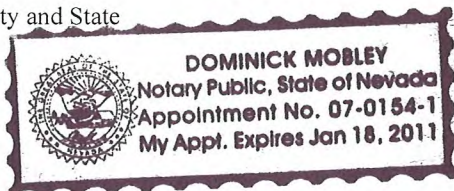
Print Name ROBIN D. LOBATO

Subscribed and sworn before me

This 13th day of July, 2010.

Notary Public in and for said County and State

Revised 10/27/08



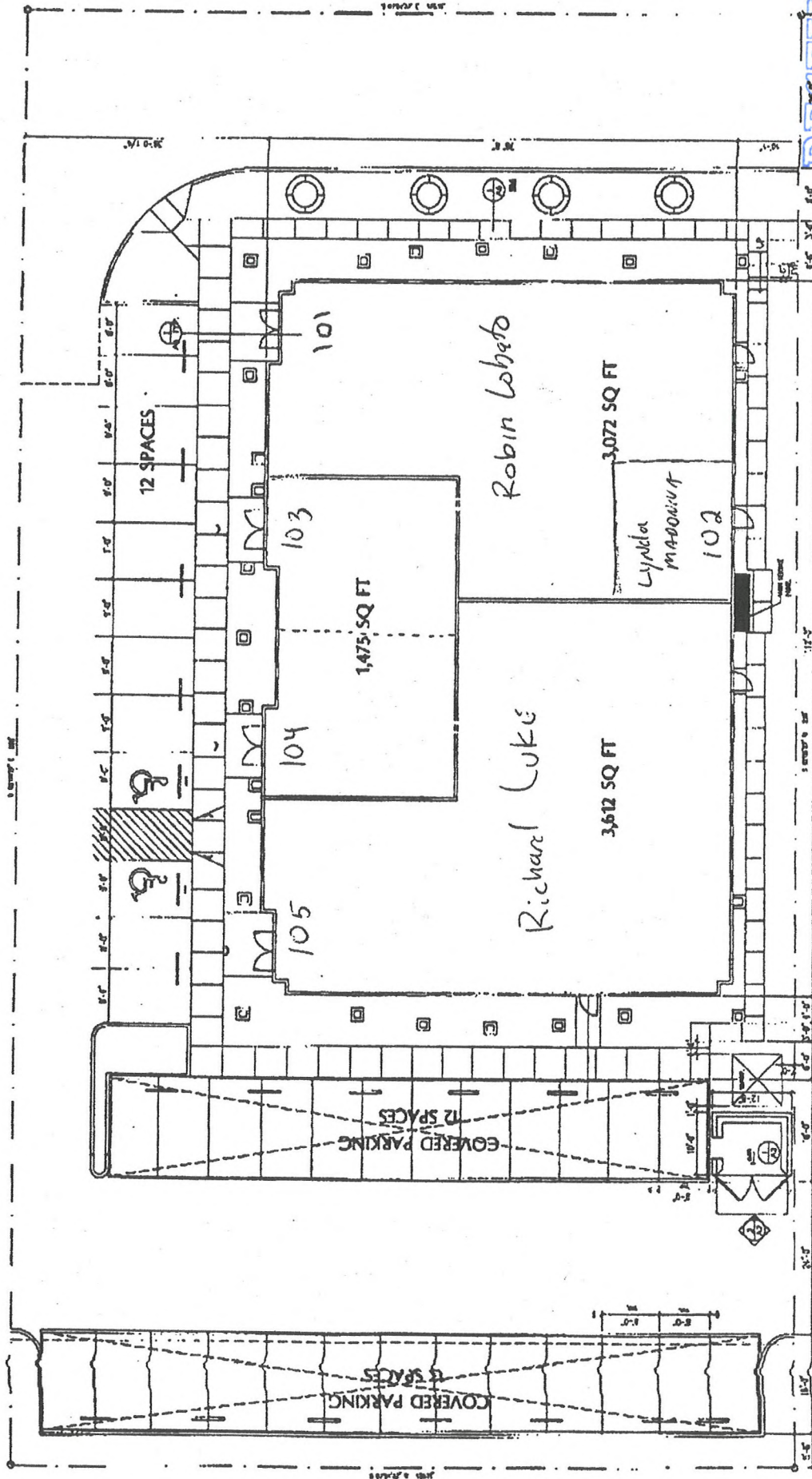
FOR DEPARTMENT USE ONLY

Case #	<u>SUP-38866</u>
Meeting Date:	<u>08/26/10</u>
Total Fee:	<u>1030.00</u>
Date Received:*	<u>07/13/10</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

JUL 22 2010

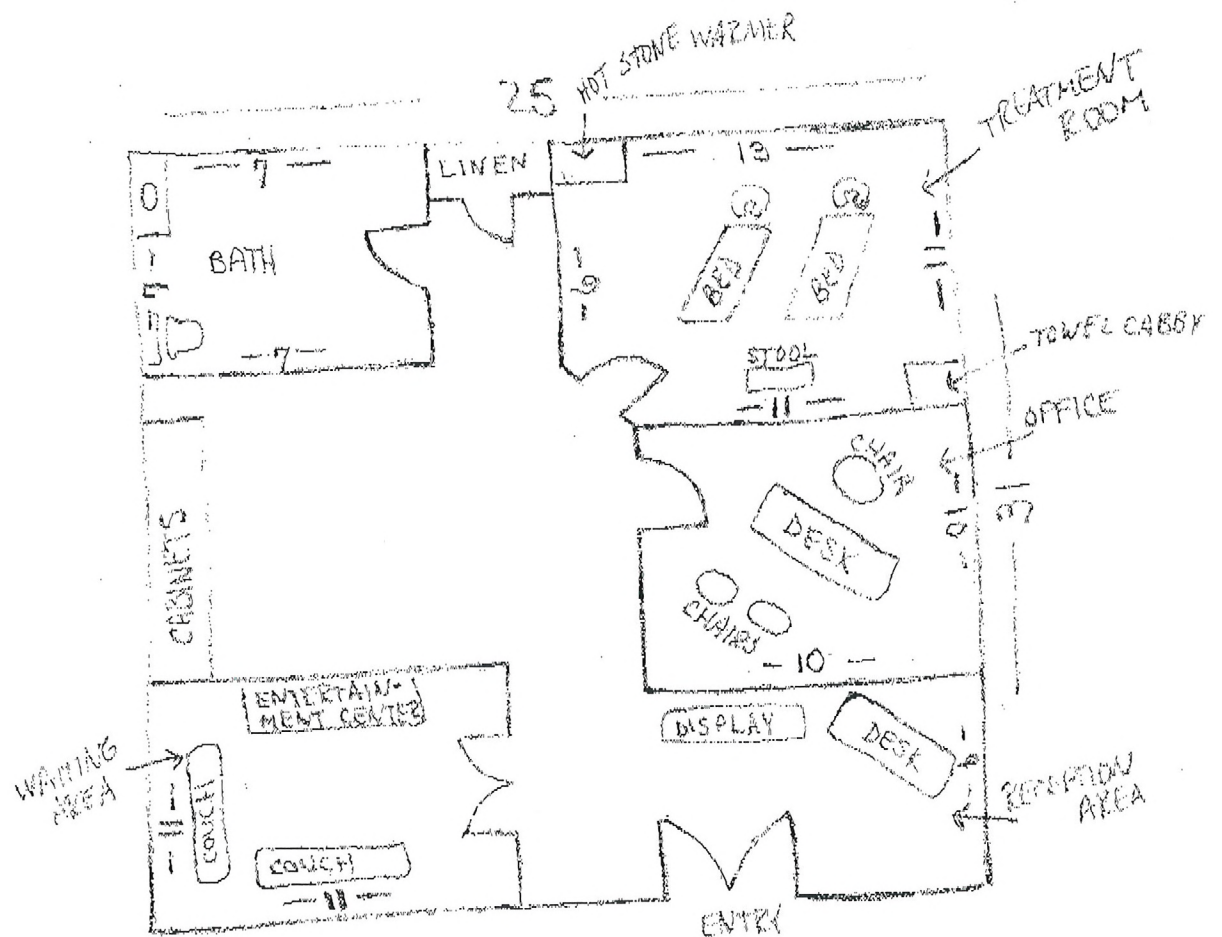


1 site plan
SCALE: 1/8" = 1'-0"

JUL 13 2010

SUP-38866

RECEIVED



775 sq. ft.

9061 W. Sahara Ave. #104
Las Vegas, NV 89117

SUP-38866
REVISED

RECEIVED
JUL 30 2010