

|                                                                                   |                                                     |
|-----------------------------------------------------------------------------------|-----------------------------------------------------|
| <b>CITY OF LAS VEGAS</b>                                                          |                                                     |
| <b>ONE MOTION / ONE VOTE</b>                                                      |                                                     |
|  | <b>Planning and Development Department</b>          |
|                                                                                   | <b>Case Planning Division</b>                       |
|                                                                                   | <b>333 North Rancho Drive, 3<sup>rd</sup> Floor</b> |
|                                                                                   | <b>Las Vegas, Nevada 89106</b>                      |
| <b>(702) 229-6301 Phone (702) 385-7268 Fax</b>                                    |                                                     |

**SUBJECT: EOT-41319 - APPLICANT/OWNER: VALLEY HEALTH SYSTEMS, LLC**

The above item has been placed on the One Motion/One Vote portion of the Planning Commission Agenda for the **MAY 10, 2011** Planning Commission meeting. All of these items will be placed at the beginning of the agenda. The Chairman of the Planning Commission will open them at the same time.

Enclosed please find the proposed conditions of approval. If you agree to these conditions, please sign this form and fax it to **Carman Burney at (702) 385-7268**. If there is no one present at the Planning Commission meeting who wants to discuss this item, you will not be called to the podium to discuss the case. However, you must be present in case any Planning Commissioner or member of the public wants to discuss the item. If you have any questions, please contact my office at (702) 229-6301.

Please sign and date that you have read and agree to the conditions and return to our office by 5:00PM **MAY 2, 2011**.

  
\_\_\_\_\_  
Signature

**5-4-2011**  
\_\_\_\_\_  
Date

**NED COLE**  
\_\_\_\_\_  
Please Print Name

**NED COLE AIA ARCHITECT INC.**  
\_\_\_\_\_  
Company Name

Sincerely,

Steve Gebeke, AICP  
Planning Supervisor  
Case Planning Division

**RECEIVED**

**MAY -4 2011**