



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

SUP-41263

Case Number: SUP-41263 APN: 138-03-611-011

Name of Property Owner: SHREE GANESHA, INC.

Name of Applicant: Kymtec, LLC dba Northwest Arms

Name of Representative: Michelle GORDON

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: _____

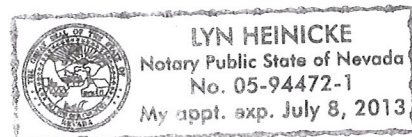
Signature of Property Owner: Rajesh Patel

Print Name: Rajesh Patel

Subscribed and sworn before me

This 22 day of MARCH, 2011

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



RECEIVED
MAR 22 2011



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: SPECIAL USE PERMIT (SUP)
Project Address (Location) 4450 N. TENAYA WAY, SUITE 100, LAS VEGAS, NV 89129
Project Name Northwest ARMS Proposed Use Second Hand Dealer
Assessor's Parcel #(s) 138-03-611-011 Ward # 4 (Firearm sales)
General Plan: existing SC proposed N/A Zoning: existing C-1 proposed N/A
Commercial Square Footage _____ Floor Area Ratio _____
Gross Acres 3.42 Lots/Units _____ Density _____
Additional Information _____

PROPERTY OWNER SHREE GANESHA, INC. Contact Raj
Address 700 FREMONT ST Phone: _____ Fax: _____
City LAS VEGAS State NV Zip 89101
E-mail Address _____

APPLICANT Kymtec dba Northwest Arms Contact Michelle Gordon
Address 50 So. Arrowhead Ln #B Phone: 467-5363 Fax: _____
City Mesquite State NV Zip 89027
E-mail Address tmac@northwestarmslv.com

REPRESENTATIVE Michelle Gordon Contact _____
Address 7893 W. Gilmore Ave Phone: 556-8003 Fax: _____
City Las Vegas State NV Zip 89129
E-mail Address mg@northwestarmslv.com

Property Owner Signature* Rajesh Patel

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

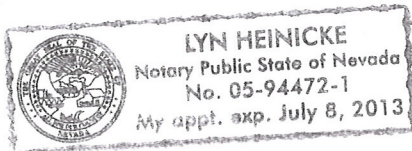
Print Name Rajesh Patel

Subscribed and sworn before me

This 22 day of MARCH, 20 11

Notary Public in and for said County and State

Revised 02.14.11



FOR DEPARTMENT USE ONLY

Case # SUP-41263
Meeting Date: 5/10/11
Total Fee: \$1,030-
Date Accepted: 3/22/11
Accepted By: [Signature]

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

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