

COPY



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **VAC-42246** APN: see attached

Name of Property Owner: The Howard Hughes Company, LLC, A Delaware LLC

Name of Applicant: Same as Owner

Name of Representative: G. C. Wallace, Inc./Paul Burn, PLS

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]

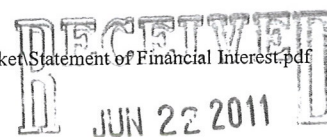
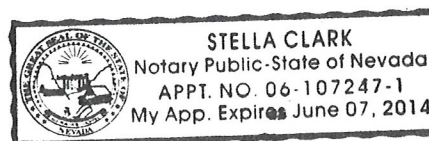
Print Name: KEVIN T. Orrock

Subscribed and sworn before me

This 10th day of May, 20 11

Stella Clark

Notary Public in and for said County and State



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137-34-416-001-83 (83)
164-03-112-84-103 (19)
164-03-112-104-237 (133)
164-03-415-804 (1)
164-03-415-007 (1)

Total 237

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JUN 22 2011



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

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Application/Petition For: Vacation Street Right of Way
Project Address (Location) CrossBridge Drive and Sky Vista Drive- Summerlin
Project Name Reversionary Parcel Map Proposed Use _____
Assessor's Parcel #(s) See attached Ward # _____
General Plan: existing _____ proposed _____ Zoning: existing _____ proposed _____
Commercial Square Footage _____ Floor Area Ratio _____
Gross Acres 42.98 Lots/Units _____ Density _____
Additional Information _____

PROPERTY OWNER The Howard Hughes Company L.P. Contact Glenn Lowrimore
Address 10801 West Charleston Blvd. 3RD Floor Phone: 791-4600 Fax: 791-4660
City Las Vegas State Nevada Zip 89146
E-mail Address jlowrimore@howardhughes.com

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

REPRESENTATIVE G.C. Wallace, Inc. Contact Paul Burn, PLS
Address 1555 South Rainbow Blvd Phone: 702-804-2060 Fax: 702-804-2299
City Las Vegas State Nevada Zip 89135
E-mail Address pburn@gcwallace.com

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 KEVIN T. ORLOCK

Subscribed and sworn before me

This 10th day of May, 20 11.

Stella Clark

Notary Public in and for said County and State



STELLA CLARK
Notary Public-State of Nevada
APPT. NO. 06-107247-1
My App. Expires June 07, 2014

Revised 10/27/08

FOR DEPARTMENT USE ONLY

Case # VAC-42246
Meeting Date: 8/9/11
Total Fee: \$1,000
Date Received: 6/22/11
Received By: Burns

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JUN 22 2011

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