



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **SDR-44908** APN: 138-15-612-012 (portion of)

Name of Property Owner: City Parkway V, INC.

Name of Applicant: The Boyer Company

Name of Representative: Same as Above

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: _____

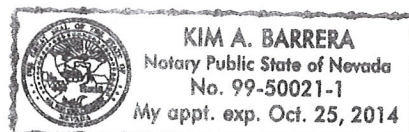
Signature of Property Owner: Elizabeth N. Fretwell

Print Name: Elizabeth N. Fretwell

Subscribed and sworn before me

This 20 day of March, 20 12

Kim Barrera
Notary Public in and for said County and State



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MAR 22 2012



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Site Development Plan Review
Project Address (Location) East side of Tenaya Way, Approx. 255' North of Cascade Valley Ct
Project Name Advanced Health Care Corporation Proposed Use Convalescent Care
Assessor's Parcel #(s) 138-15-612-012 (portion of) Ward # 1
General Plan: existing LI/R proposed N/A Zoning: existing C-PB proposed N/A
Commercial Square Footage 33,515 SF Floor Area Ratio _____
Gross Acres Approx. 2.7 Acres Lots/Units _____ Density _____
Additional Information _____

PROPERTY OWNER City Parkway V. INC. Contact Elizabeth N. Fretwell
Address 495 S. Main St Phone: (702) 229-6501 Fax: _____
City Las Vegas State NV Zip 89101
E-mail Address _____

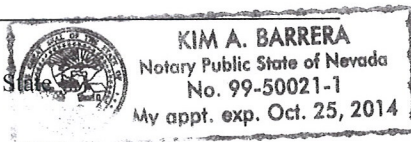
APPLICANT The Boyer Company Contact Nate Swain
Address 90 S. 400 West, suite 200 Phone: (801) 521-4781 Fax: (801) 366-7103
City Salt Lake City State UT Zip 84101
E-mail Address nswain@boyercompany.com

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

Property Owner Signature* Elizabeth N. Fretwell
* An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps, and Parcel Maps.
Print Name Elizabeth N. Fretwell

Subscribed and sworn before me
This 20 day of March, 20 12.
Kim A. Barrera

Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case #	<u>SDR-44908</u>
Meeting Date:	<u>5-8-12 PC</u>
Total Fee:	<u>\$1,030</u>
Date Received:*	<u>3/21/12</u>
Received By:	<u>[Signature]</u>

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

PROJECT NARRATIVE:

[illegible]

EQUIPMENT LEGEND:

 SOLID TOP = (N/C) OWNER PROVIDED, COMPLETED	 REFERENCES = (N/C) OWNER PROVIDED AND INSTALLED
 CASHIEN CHIT = (N/C) OWNER PROVIDED	 TONGHONG = (N/C) OWNER PROVIDED AND INSTALLED
 75 LB COMBINATION DRIVER = (N/C) OWNER PROVIDED AND INSTALLED	 N/A = (N/C) OWNER PROVIDED AND INSTALLED
 COMBINATION WAGON = (N/C) OWNER PROVIDED	 N/A = (N/C) OWNER PROVIDED AND INSTALLED

[RES]	RESIDENTIAL WAGER - (N.I.C.) OWNER PROVIDED AND INSTALLED
[RES]	RESIDENTIAL WAGER - (N.I.C.) OWNER PROVIDED AND INSTALLED
[VEND]	VENDING MACHINE - (N.I.C.) OWNER PROVIDED AND INSTALLED
[ICE]	ICE MAKER - CONTRACTOR PROVIDED AND INSTALLED
▲	EXIT

MAXIMUM OCCUPANCY:

OCCUPANCY ALLOWANCES, TABLE 1004.1

BUSINESS AREAS, OFFICES / ADMINISTRATIVE AREAS = 1 PERSON / 100 S.F. GROSS
LOCKER ROOM = 1 PERSON / 50 S.F. GROSS
INSTITUTIONAL AREAS, INPATIENT TREATMENT AREA = 1 PERSON / 240 S.F. GROSS; OUTPATIENT AREAS = 1 PERSON / 100 S.F. GROSS
STORAGE / MECHANICAL AREAS = 1 PERSON / 300 S.F. GROSS
KITCHEN = 1 PERSON / 200 S.F. GROSS
TOTAL BUILDING OCCUPANT LOAD NOT INCLUDING RESIDENTIAL AREAS = 217
2nd OF EXIT PER OCCUPANT = 43.4' OF EXIT WIDTH REQUIRED. TABLE 1005.1

D

2000

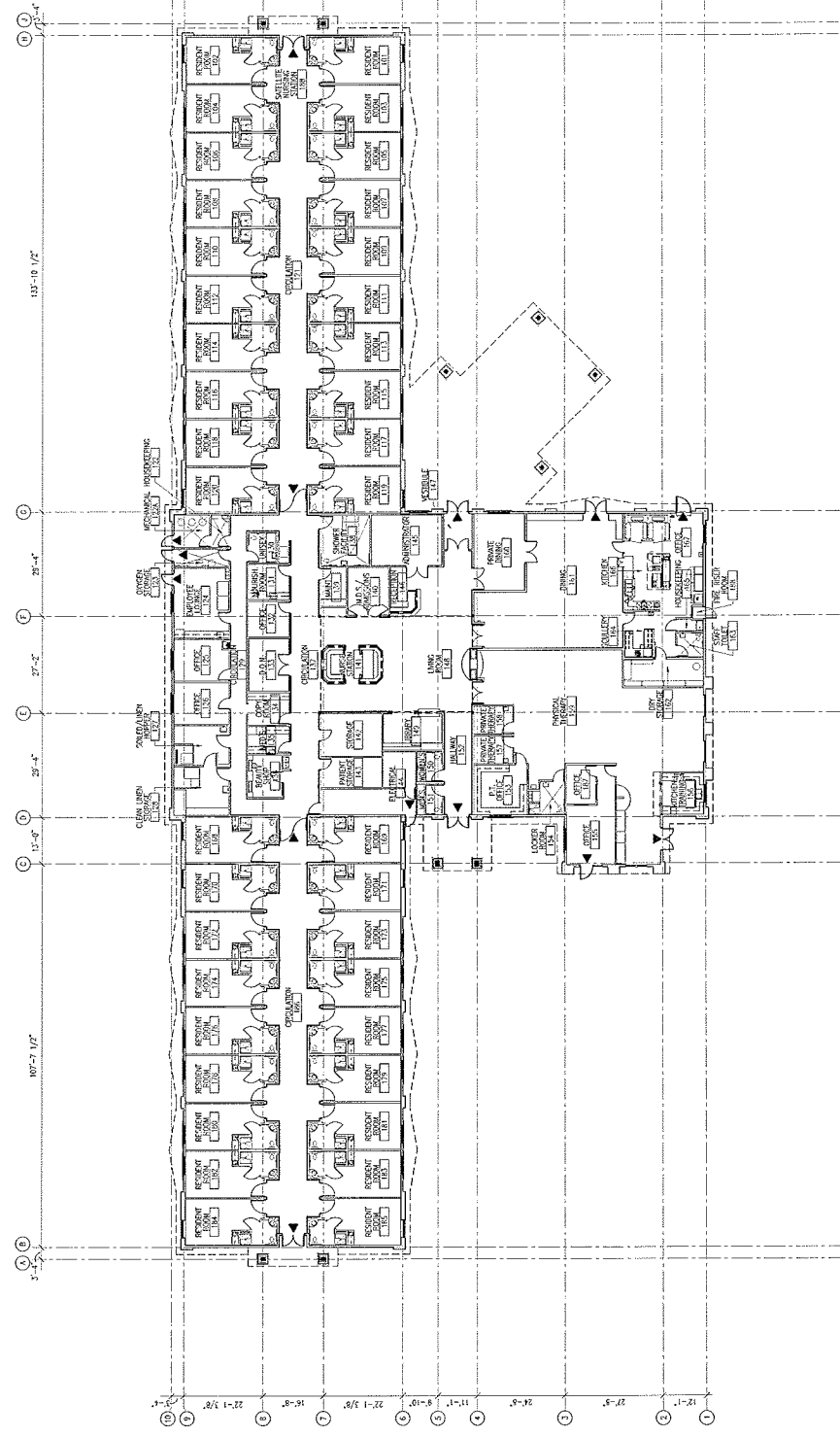
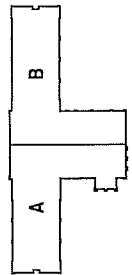
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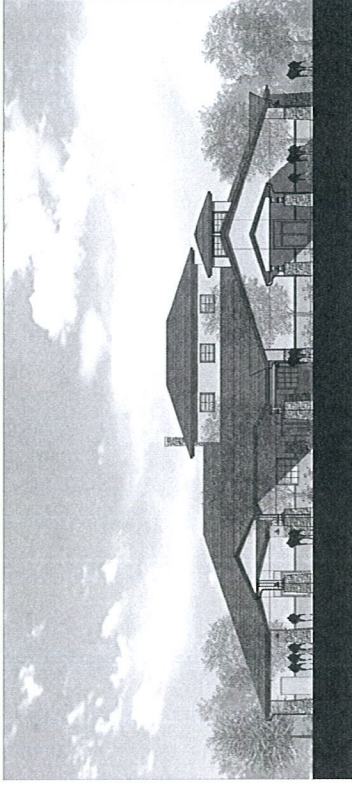
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Year	Percentage of Population Aged 65 and Over
1950	7%
1960	10%
1970	12%
1980	14%
1990	16%
2000	18%

2

SDR-44908

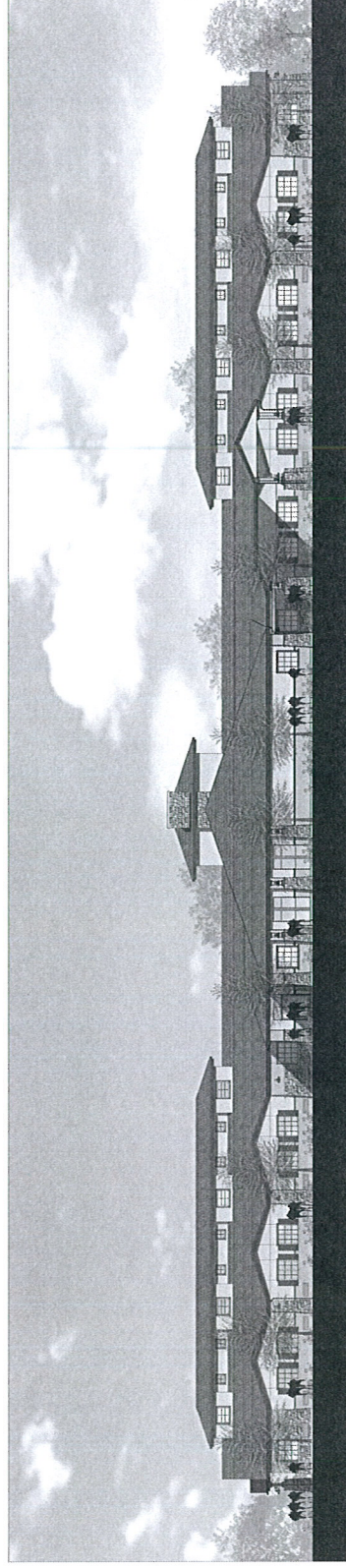




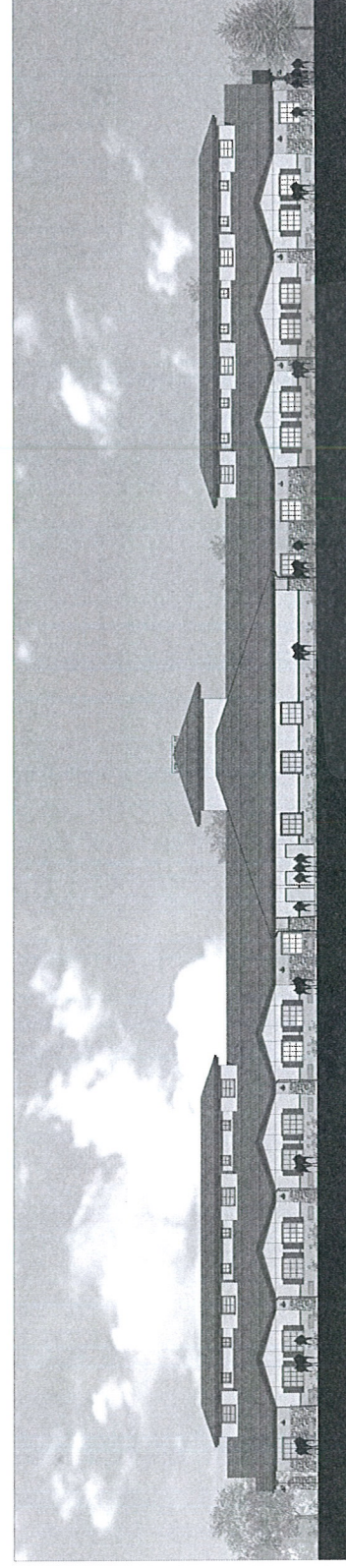
South Elevation
1/16" = 1'-0"



North Elevation
1/16" = 1'-0"



West Elevation
1/16" = 1'-0"



East Elevation
1/16" = 1'-0"

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Architectural
Landscape Plan

Vicinity Map A5
N.T.S.

Architectural Landscape Plan A4
N.T.S.

DATE	DESCRIPTION

AHC of Las Vegas II
Las Vegas, NV, 89103
ATN #193615512003
69103

THE RICHARDSON
DESIGN
PARTNERSHIP, LLC.
510 South 400 East
Salt Lake City, Utah 84142
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F: 801.355.6880

