



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

RQR-51410

Case Number:

APN: ~~139-30-812-001~~ **139-31-510-019**

Name of Property Owner: GGP Meadows Mall, LLC

Name of Applicant: Lamar Central Outdoor, LLC

Name of Representative: _____

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: _____

Print Name: Mary Bentie Binden

Subscribed and sworn before me

This 7th day of October, 2013

Kathleen Fabre
Notary Public in and for said County and State





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Required Review
 Project Address (Location) 4300 Meadows Lane
 Project Name GGP Center Sign Review Proposed Use billboard
 Assessor's Parcel #(s) 139-31-510-019 Ward # 1
 General Plan: existing _____ proposed _____ Zoning: existing C-1 proposed _____
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres _____ Lots/Units _____ Density _____
 Additional Information Required Review for an existing billboard

PROPERTY OWNER GGP Meadows Mall, LLC Contact Jeff Glonnette
 Address PO Box 617905 Phone: _____ Fax: _____
 City Chicago State IL Zip 60611-7905
 E-mail Address _____

APPLICANT Lamar Central Outdoor, LLC Contact Scott Nafzger
 Address 1863 Helm Dr. Phone: (702) 873-4800 Fax: (702) 873-4344
 City Las Vegas State NV Zip 89119
 E-mail Address snafzger@lamar.com

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

I certify that I am the applicant and that the information submitted with this application is true and accurate to the best of my knowledge and belief. I understand that the City is not responsible for inaccuracies in information presented, and that inaccuracies, false information or incomplete application may cause the application to be rejected. I further certify that I am the owner or purchaser (or option holder) of the property involved in this application, or the lessee or agent fully authorized by the owner to make this submission, as indicated by the owner's signature below.

Property Owner Signature* Mary Ben Fabre - Binder

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

Print Name MARY BEN FABRE - BINDER

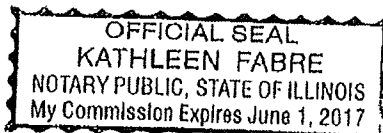
Subscribed and sworn before me

This 17th day of October, 2013

Kathleen Fabre

Notary Public in and for said County and State

Revised 10/27/08

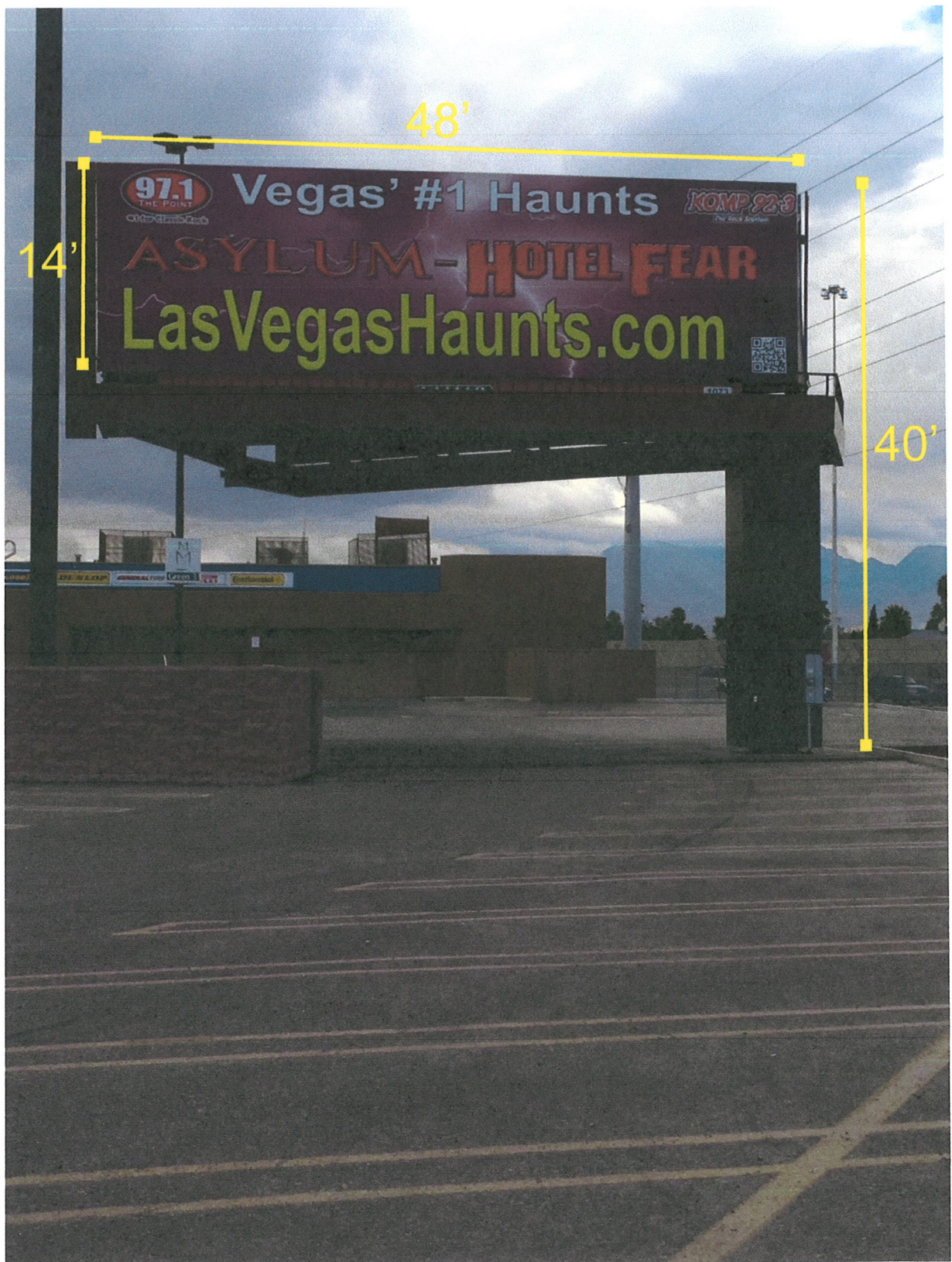


FOR DEPARTMENT USE ONLY

Case # R12R-51410
 Meeting Date: 2/4/13
 Total Fee: _____
 Date Received: * _____
 Received By: _____

* 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.

F:\Depot\Application Packet\Application Form.pdf



RQR-51410

RECEIVED

OCT 17 2013

City of Las Vegas
Dept. of Planning