



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: VAC-52434 APN: 125-24-410-003

Name of Property Owner: South Providence Holdings, LLC

Name of Applicant: South Providence Holdings, LLC

Name of Representative: Focus Managment Services

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: _____

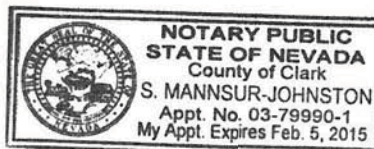
Print Name: _____

Thomas J. DeVore

Subscribed and sworn before me

This 18th day of NOVEMBER, 2013

J. Mann
Notary Public in and for said County and State





DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: VAC-52434 APN: 125-24-401-006

Name of Property Owner: S P-5, LLC

Name of Applicant: S P-5, LLC

Name of Representative: Focus Managment Services

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: _____

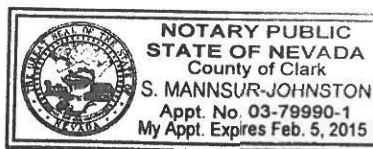
Signature of Property Owner: _____

Print Name: Thomas J. De Vore

Subscribed and sworn before me

This 18th day of NOVEMBER, 2013

S. Mannsurd
Notary Public in and for said County and State





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Tentative Map Vacation
 Project Address (Location) Shaumber and Rome
 Project Name POD 308 Proposed Use _____
 Assessor's Parcel #(s) 126-24-410-003 Ward # 6
 General Plan: existing _____ proposed _____ Zoning: existing U proposed PD
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres 14.12 Lots/Units 85 Density 6.0
 Additional Information _____

PROPERTY OWNER South Providence Holdings, LLC Contact _____
 Address 3455 Cliff Shadows Pkwy #220 Phone: _____ Fax: _____
 City Las Vegas State NV Zip 89129
 E-mail Address _____

APPLICANT CG-211, LLC Contact _____
 Address 3455 Cliff Shadow Pkwy #220 Phone: _____ Fax: _____
 City Las Vegas State NV Zip 89129
 E-mail Address _____

REPRESENTATIVE Focus Managment Services Contact Chris Dingell
 Address 3455 Cliff Shadows Pkwy #220 Phone: 7022424949 Fax: _____
 City Las Vegas State NV Zip 89129
 E-mail Address cdingell@fcglv.com

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* _____

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

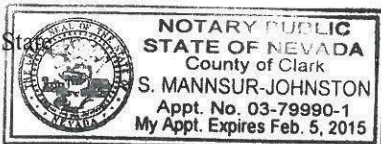
Print Name Thomas J DeVore

Subscribed and sworn before me

This 18th day of November, 2013.

[Signature]

Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case # VAC-52434
 Meeting Date: 03/11/14 PC
 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.



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: ~~Tentative Map~~ Vacation
 Project Address (Location) Shaumber and Rome
 Project Name POD 308 Proposed Use _____
 Assessor's Parcel #(s) 126-24-401-006 Ward # 6
 General Plan: existing _____ proposed _____ Zoning: existing U proposed PD
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres 14.12 Lots/Units ~~85~~ 86 Density 6.0
 Additional Information _____

PROPERTY OWNER S P-5, LLC Contact _____
 Address 3455 Cliff Shadows Pkwy #220 Phone: _____ Fax: _____
 City Las Vegas State NV Zip 89129
 E-mail Address _____

APPLICANT CG-211, LLC Contact _____
 Address 3455 Cliff Shadow Pkwy #220 Phone: _____ Fax: _____
 City Las Vegas State NV Zip 89129
 E-mail Address _____

REPRESENTATIVE Focus Managment Services Contact Chris Dingell
 Address 3455 Cliff Shadows Pkwy #220 Phone: 7022424949 Fax: _____
 City Las Vegas State NV Zip 89129
 E-mail Address cdingell@fcglv.com

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* [Signature]

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

Print Name Thomas J DeVore

Subscribed and sworn before me

This 18th day of November, 20 13

[Signature]

Notary Public in and for said County and State



Revised 10/27/08

FOR DEPARTMENT USE ONLY

Case #	<u>VAC-52434</u>
Meeting Date:	<u>03/11/14 PC</u>
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.

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DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Vacation
Project Address (Location) _____
Project Name POD 308 Proposed Use _____
Assessor's Parcel #(s) 126-24-401-024 Ward # 6
General Plan: existing _____ proposed _____ Zoning: existing _____ proposed _____
Commercial Square Footage _____ Floor Area Ratio _____
Gross Acres _____ Lots/Units _____ Density _____
Additional Information _____

PROPERTY OWNER NVRE, LLC Contact LEVI PARKER
Address 3425 Cliff Shadows Pkwy #130 Phone: 331-2800 Fax: 331-2801
City Las Vegas State NV Zip 89129
E-mail Address _____

APPLICANT South Providence Holdings Contact _____
Address 3455 Cliff Shadows Pkwy #220 Phone: _____ Fax: _____
City Las Vegas State NV Zip 89129
E-mail Address _____

REPRESENTATIVE Focus Management Services Contact Chris Dingell
Address 3455 Cliff Shadows Pkwy #220 Phone: (702) 242-4949 Fax: _____
City Las Vegas State NV Zip 89129
E-mail Address cdingell@fcglv.com

Property Owner Signature* [Signature]

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

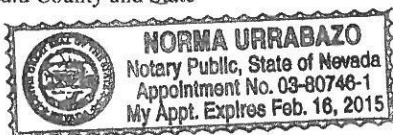
Print Name LEVI PARKER

Subscribed and sworn before me

This 6th day of February, 2014.

Notary Public in and for said County and State

Revised 10/27/08



FOR DEPARTMENT USE ONLY

Case # VAC-52434

Meeting Date: 03/11/14 PC

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.

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PRJ-51934
02/13/14