



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

SDR-52726

Case Number: ~~SAE-52727~~ APN: 139.34.210.047

Name of Property Owner: DROCK 3RD STREET LLC

Name of Applicant: DROCK 3RD STREET LLC

Name of Representative: DEREK STEVENS

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: _____

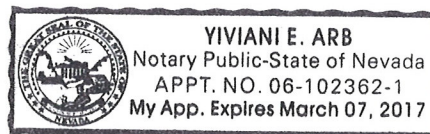
Signature of Property Owner: [Handwritten Signature]

Print Name: Derek J Stevens

Subscribed and sworn before me

This 27th day of January, 2014

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





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: CCCH TEMPORARY VALET LOT
 Project Address (Location) 200 S. 3RD ST, LAS VEGAS NV 89101
 Project Name _____ Proposed Use _____
 Assessor's Parcel #(s) 139.24.210.047 Ward # 3
 General Plan: existing _____ proposed _____ Zoning: existing C.V proposed C.V
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres 2.76 Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER DLOCK 3RD STREET LLC Contact DANIEL MORRELL
 Address 21777 HOOPER RD Phone: ^{586.}497.7093 Fax: ^{586.}497.7090
 City WARREN State MI Zip 48089
 E-mail Address dmorrell@coldheading.com

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

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* [Signature]

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

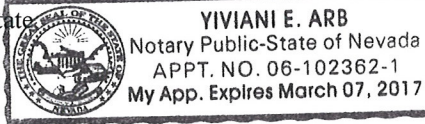
Print Name Derek J. Stevens

Subscribed and sworn before me

This 27th day of January, 2014.

[Signature]

Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case # SDR-52726
 Meeting Date: 3/11/2014 PC
 Total Fee: 1,030.00
 Date Received:* 1/28/14
 Received By: GREG K.

*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.