



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

VAR-52650

Case Number: PRJ-52102 APN: 162-04-210-035

Name of Property Owner: Lynn Holt and Josh Hamilton

Name of Applicant: Lynn Holt and Josh Hamilton

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: _____

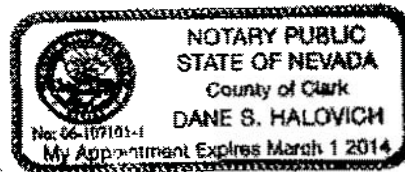
Signature of Property Owner: [Handwritten Signature]

Print Name: Lynn Holt / Josh Hamilton

Subscribed and sworn before me

This 23 day of December, 2013
[Handwritten Signature]

Notary Public in and for said County and State



PRJ-52102
01/22/14



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Holt/Hamilton Request for Variance - Residential Garage - Detached
 Project Address (Location) 4 Crescent Drive, Las Vegas, NV 89102
 Project Name Holt/Hamilton Garage Proposed Use _____
 Assessor's Parcel #(s) 162-04-210-035 Ward # 1 - Tarkanian
 General Plan: existing _____ proposed _____ Zoning: existing RE proposed _____
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres .53 Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER Lynn Holt & Josh Hamilton Contact Lynn Holt
 Address 4 Crescent Drive Phone: 8572107373 Fax: 7023024161
 City Las Vegas State NV Zip 89102
 E-mail Address lynnholt@aol.com

APPLICANT Lynn Holt & Josh Hamilton Contact Lynn Holt
 Address 4 Crescent Drive Phone: 8572107373 Fax: 7023024161
 City Las Vegas State NV Zip 89102
 E-mail Address lynnholt@aol.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.

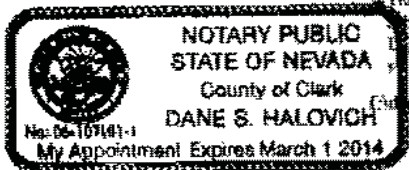
Property Owner Signature* [Signature]
 * An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps, and Parcel Maps.
 Print Name Lynn Holt and Josh Hamilton

FOR DEPARTMENT USE ONLY

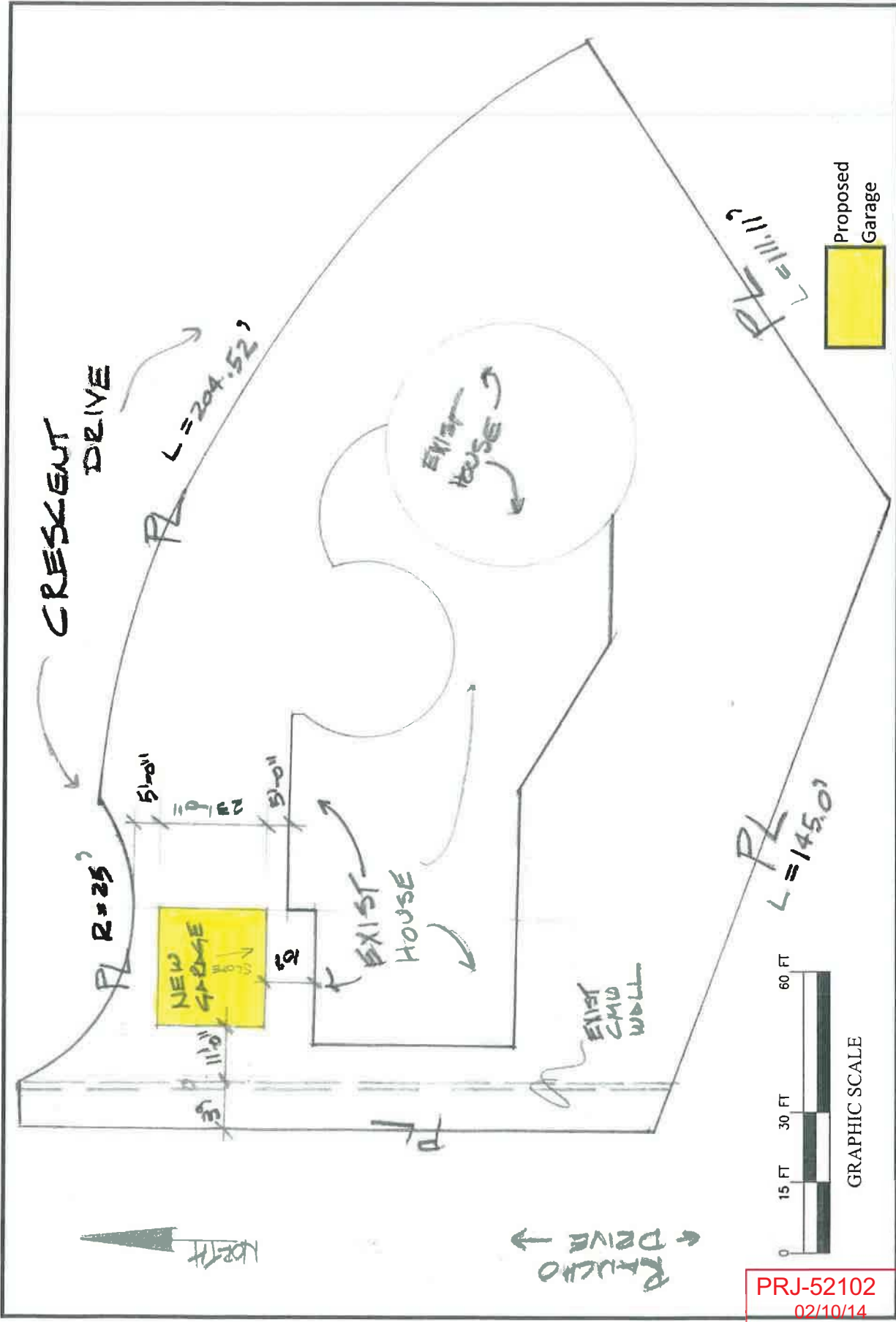
Case #	<u>VAR-52650</u>
Meeting Date:	<u>03/11/14</u> PC
Total Fee:	
Date Received:*	
Received By:	

Subscribed and sworn before me
 This 23 day of DECEMBER, 2013
[Signature]

Notary Public in and for said County and State



The application will not be deemed complete until the subject matter has been reviewed by the Department of Planning for consistency with applicable provisions of the Zoning Ordinance.
 [Stamp: PRJ-52102 03/22/14]
 File Path: \\net\Application Packet\Application Form.pdf



Proposed Garage

Owner's Name	Site Address	Proposed
Lynn Holt and Joshua Hamilton	4 Crescent Drive	New Garage

PRJ-52102
02/10/14

VAR-52650 - REVISED

