



## DEPARTMENT OF PLANNING

### STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-55214** APN: 139.28.801.010 + 011

Name of Property Owner: RANIK BREWING, LLC

Name of Applicant: TENAYA CREEK BREWERY

Name of Representative: CHRISTINA ROUSH

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: \_\_\_\_\_

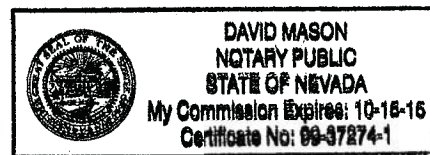
Signature of Property Owner: \_\_\_\_\_

Print Name: RICHARD A. ETTER

Subscribed and sworn before me

This 21st day of July, 2014

Notary Public in and for said County and State





# DEPARTMENT OF PLANNING

## APPLICATION / PETITION FORM

Application/Petition For: SUP - BREW PUB  
 Project Address (Location) 831 W. BONANZA RD. LAS VEGAS, NV 89106  
 Project Name TENAYA CREEK BREWERY Proposed Use BREW PUB  
 Assessor's Parcel #(s) 139.28.801.010 + 011 Ward # 5 - BARLOW  
 General Plan: existing M proposed M Zoning: existing M proposed M  
 Commercial Square Footage 12,866 Floor Area Ratio \_\_\_\_\_  
 Gross Acres 1.57 Lots/Units 2 Density N/A  
 Additional Information \_\_\_\_\_

PROPERTY OWNER PANK BREWING, LLC Contact CHRISTINA ROUSH  
 Address 6980 S. CIMARRON, STE 200 Phone: 702) 210-6300 Fax: 702) 243-7700  
 City LAS VEGAS State NV Zip 89113  
 E-mail Address C.ROUSH@gmail.com

APPLICANT TENAYA CREEK BREWERY Contact CHRISTINA ROUSH  
 Address 3101 N. TENAYA WAY Phone: 702) 210-6300 Fax: 702) 243-7700  
 City LAS VEGAS State NV Zip 89128  
 E-mail Address C.ROUSH@gmail.com

REPRESENTATIVE N/A 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 purchase (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 RICHARD A. ETTER

Subscribed and sworn before me

This 21st day of JULY, 20 14

[Signature]

Notary Public in and for said County and State



DAVID MASON  
 NOTARY PUBLIC  
 STATE OF NEVADA  
 My Commission Expires: 10-15-15  
 Certificate No: 99-37274-1

### FOR DEPARTMENT USE ONLY

Case # **SUP-55214**  
 Meeting Date: **09/09/14 PC**  
 Total Fee: \_\_\_\_\_  
 Date Received: \*  
 Received By: \_\_\_\_\_

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