



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-73826** APN: 138-28-501-009
Name of Property Owner: SSC PROPERTIES, LLC
Name of Applicant: NEVADA MEDICAL GROUP, LLC
Name of Representative: ROBERT HASMAN

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: Leonard Simon

Print Name: LEONARD SIMON

Subscribed and sworn before me

This _____ day of _____, 20____

Notary Public in and for said County and State

CALIFORNIA JURAT WITH AFFIANT STATEMENT

GOVERNMENT CODE § 8202

- ☒ See Attached Document (Notary to cross out lines 1–6 below)
☐ See Statement Below (Lines 1–6 to be completed only by document signer[s], not Notary)

Signature of Document Signer No. 1

Signature of Document Signer No. 2 (if any)

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California

County of Los Angeles

Subscribed and sworn to (or affirmed) before me

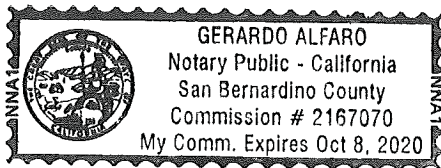
on this 18 day of June, 2018,
 by Date Month Year

(1) Leonard Simon

(and (2) _____),
Name(s) of Signer(s)

proved to me on the basis of satisfactory evidence to be the person(s) who appeared before me.

Signature [Signature]
Signature of Notary Public



Place Notary Seal and/or Stamp Above

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: Statement of financial interest

Document Date: 6/18/18 Number of Pages: 1

Signer(s) Other Than Named Above: SSg Properties LLC, Nevada Medical group LLC



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: DISPENSARY LICENSE
 Project Address (Location) 1591 N. BUFFALO, LAS VEGAS, NV 89128
 Project Name BUFFALO CANYON Proposed Use _____
 Assessor's Parcel #(s) 138-28-501-009 Ward # 2
 General Plan: existing _____ proposed _____ Zoning: existing _____ proposed _____
 Commercial Square Footage 2,646 Floor Area Ratio 21.8
 Gross Acres 1.13 Lots/Units 1 Density _____
 Additional Information _____

PROPERTY OWNER SSG PROPERTIES, LLC Contact LEONARD SIMON
 Address 1591 N. BUFFALO Phone: 702-463-0123 Fax: _____
 City LAS VEGAS State NV Zip 89128
 E-mail Address CHRIS@VIRTUSCO.COM

APPLICANT NEVADA MEDICAL GROUP Contact ROBERT HASMAN
 Address 3375 PEPPER LN Phone: 702-769-2725 Fax: 702-583-7916
 City LAS VEGAS State NV Zip 89120
 E-mail Address RH@NEVADA-MEDICALGROUP.COM

REPRESENTATIVE ROBERT HASMAN Contact ROBERT HASMAN
 Address 3375 PEPPER LN, Phone: 702-769-2725 Fax: 702-583-7916
 City LAS VEGAS State NV Zip 89120
 E-mail Address RH@NEVADA-MEDICALGROUP.COM

Property Owner Signature* Leonard Simon
 * An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps, and Parcel Maps.
 Print Name LEONARD SIMON

Subscribed and sworn before me

This _____ day of _____, 20____.

Notary Public in and for said County and State

Revised 10/27/08

FOR DEPARTMENT USE ONLY

Case #	SUP-73826
Meeting Date:	
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

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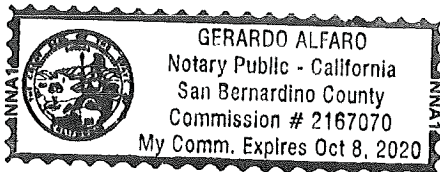
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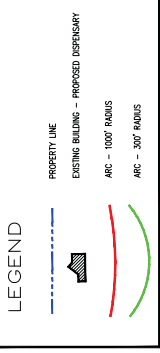
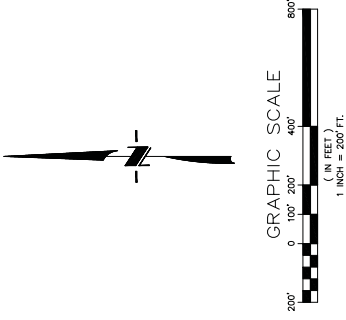
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Title or Type of Document: Department of planning

Document Date: 6/18/18 Number of Pages: 1

Signer(s) Other Than Named Above: _____



CERTIFICATION

TO CITY OF LAS VEGAS:

THIS MAP IS TO CERTIFY THAT THE BELOW INFORMATION IS BASED ON THE RADII PROXIMITY REQUIREMENTS OUTLINED IN THE CITY OF LAS VEGAS TITLE 19 CODE. THE INFORMATION WAS OBTAINED FROM THE CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADII LIMITS. THE FINDINGS ARE AS FOLLOWS:

SEPARATION FROM SCHOOLS
NONE LE WITHIN THE 300 FT RADIIUS AREAS

SEPARATION FROM A CITY PARK
NONE LE WITHIN THE 300 FT RADIIUS AREAS

SEPARATION FROM A CHURCH / HOUSE OF WORSHIP
NONE LE WITHIN THE 300 FT RADIIUS AREAS

INDIVIDUAL CARE-FAMILY HOME, INDIVIDUAL CARE-GROUP HOME, OR INDIVIDUAL CARE CENTER
NONE LE WITHIN THE 300 FT RADIIUS AREAS

COMMUNITY RECREATIONAL FACILITY (PUBLIC)
NONE LE WITHIN THE 300 FT RADIIUS AREAS

ANY USE, WHOSE PRIMARY FUNCTION IS TO PROVIDE RECREATIONAL OPPORTUNITIES TO MINORS
NONE LE WITHIN THE 300 FT RADIIUS AREAS

ANY USE WHOSE PRIMARY FUNCTION IS TO PROVIDE RECREATIONAL OPPORTUNITIES TO MINORS, SUCH USES INCLUDE, WITHOUT LIMITATION, COMMERCIAL RECREATION/AMUSEMENT (INDOOR OR OUTDOOR); LIBRARY, ART GALLERY OR MUSEUM (PUBLIC); TEEN DANCE CENTER AND MARTIAL ARTS GYMNASIUM; AND RECREATION FACILITIES FOR MINORS.
NONE LE WITHIN THE 300 FT RADIIUS AREAS

PRJ-73684
06/28/18

NO. REVISIONS		CITY OF LAS VEGAS, CLARK COUNTY, NEVADA		CITY OF LAS VEGAS, CLARK COUNTY, NEVADA	
1 REVISION-1		APN: 138-28-501-009		LOCATION: 1591 N. BUFFALO DRIVE	
2 REVISION-2		MEDICAL AND RECREATIONAL MARIJUANA DISPENSARY		PROXIMITY MAP	
3 REVISION-3		PREPARED FOR: NEVADA MEDICAL GROUP, LLC		PREPARED FOR: NEVADA MEDICAL GROUP, LLC	
4 REVISION-4		CIVILITICS PROFESSIONAL LAND SURVEYING		CIVILITICS PROFESSIONAL LAND SURVEYING	
5 REVISION-5		LAS VEGAS, NV 89108 PHONE: (702) 740-4290		LAS VEGAS, NV 89108 PHONE: (702) 740-4290	
6 REVISION-6		FAX: (702) 740-4290		FAX: (702) 740-4290	
7 REVISION-7		WWW.CIVILITICS.COM		WWW.CIVILITICS.COM	
8 REVISION-8		PROJECT NO. 3949 _veg03-buffalo		DRAWING NAME: PROXIMITY SURVEY	
9 REVISION-9		SHEET 1 OF 1 SHEETS		SHEET 1 OF 1 SHEETS	
10 REVISION-10		DATE APR		DATE APR	