



## 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

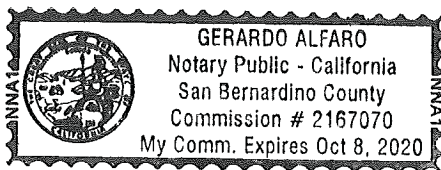
on this 18 day of June, 2018,  
 by Date Month Year

(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

#### 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.

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Subscribed and sworn to (or affirmed) before me

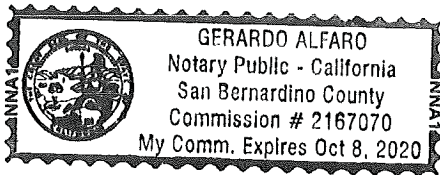
on this 18 day of June, 2018,  
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(1) Leonard Simon

(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: Declaration of planning

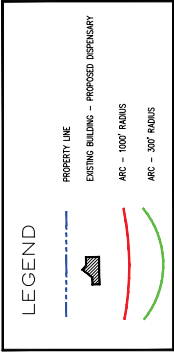
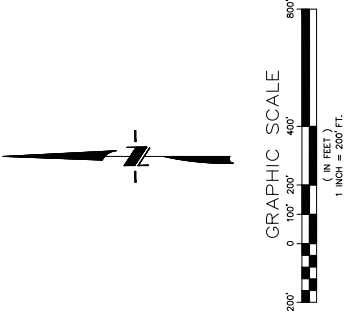
Document Date: 6/18/18 Number of Pages: 1

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 RADIO 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 RADIO LIMITS. THE FINDINGS ARE AS FOLLOWS:

SEPARATION FROM SCHOOLS  
NONE LE WITHIN THE 300 FT RADIUS AREAS

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

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

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

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

ANY USE, WHOSE PRIMARY FUNCTION IS TO PROVIDE RECREATIONAL OPPORTUNITIES TO MINORS  
NONE LE WITHIN THE 300 FT RADIUS 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; OR RECREATION CENTER FOR MINORS.  
NONE LE WITHIN THE 300 FT RADIUS AREAS

PRJ-73684  
06/28/18

|                 |  |                                                                                                                            |  |                                                                                                                            |  |
|-----------------|--|----------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------|--|
| NO.   REVISIONS |  | CITY OF LAS VEGAS, CLARK COUNTY, NEVADA                                                                                    |  | CITY OF LAS VEGAS, CLARK COUNTY, NEVADA                                                                                    |  |
| REVISION-1      |  | APN: 138-28-501-009                                                                                                        |  | LOCATION: 1591 N. BUFFALO DRIVE                                                                                            |  |
| REVISION-2      |  | MEDICAL AND RECREATIONAL MARIJUANA DISPENSARY                                                                              |  | PROXIMITY MAP                                                                                                              |  |
| REVISION-3      |  | PREPARED FOR: NEVADA MEDICAL GROUP, LLC                                                                                    |  | CIVILITICS PROFESSIONAL LAND SURVEYING                                                                                     |  |
| REVISION-4      |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| REVISION-5      |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| REVISION-6      |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| REVISION-7      |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| REVISION-8      |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| REVISION-9      |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| REVISION-10     |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  | CLARK COUNTY BUSINESS LICENSE VERIFICATION SERVICES AND VISUAL INSPECTIONS OF THE AREAS WITHIN THE SPECIFIED RADIO LIMITS. |  |
| DATE            |  | DATE                                                                                                                       |  | DATE                                                                                                                       |  |
| BY              |  | BY                                                                                                                         |  | BY                                                                                                                         |  |
| APPR            |  | APPR                                                                                                                       |  | APPR                                                                                                                       |  |