DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

SUP-73889

Case Number: PRJ-73776 APN: 138-36-803-005

Name of Property Owner: KEITH B. & DENISE M. AINSWORTH

Name of Applicant: LAS VEGAS GOURMET BAKERY

Name of Representative: JOHN VORNSAND, AICP

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: Denise Ainsworth

Print Name: Keith B Ainsworth Denise Ainsworth

Subscribed and sworn before me

This 27 day of June, 2018

Michelle Moser

Notary Public in and for said County and State Flagler County, Florida

MICHELLE MOSER
Notary Public, State of Florida
Commission# GG 211599
My comm. expires May 1, 2022

PRJ-73776
07/02/18

Revised 03/28/16

DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Rezoning from C-1 to C-2; Special Use Permit for food procesing

Project Address (Location) 5240 W. Charleston Blvd.

Project Name Las Vegas Gourmet Bakery **Proposed Use** Food Processing

Assessor's Parcel #(s) 138-38-803-005 **Ward #** 1-Tarkanian

General Plan: existing MXU proposed MXU **Zoning:** existing C-1 proposed C-2

Commercial Square Footage _____ **Floor Area Ratio** _____

Gross Acres _____ **Lots/Units** _____ **Density** _____

Additional Information _____

PROPERTY OWNER Keith B. & Denise M. Ainsworth **Contact** _____

Address 7060 Darby Avenue **Phone:** _____ **Fax:** _____

City Las Vegas **State** NV **Zip** 89117

E-mail Address _____

APPLICANT Avatar Foods, Inc. **Contact** Michael Ohgigian

Address 4295 W. Post Road **Phone:** (702) 409-2969 **Fax:** _____

City Las Vegas **State** NV **Zip** 89118

E-mail Address michael@avatarnaturalfoods

REPRESENTATIVE John Vornsand, AICP **Contact** John Vornsand

Address 62 Swan Circle **Phone:** (702) 896-2932 **Fax:** (702) 896-2932

City Henderson **State** NV **Zip** 89074

E-mail Address landuseplanning@embarqmail.com

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* Keith B Ainsworth Denise Ainsworth

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

Print Name Keith B Ainsworth Denise Ainsworth

Subscribed and sworn before me

This 21 day of June, 20 18.

Michelle Moser

Notary Public in and for said County and State
Flagler County, Florida

MICHELLE MOSER
Notary Public, State of Florida
Commission# GG 211599
My comm. expires May 1, 2022

Revised 03/28/16

FOR DEPARTMENT USE ONLY

Case #	SUP-73889
Meeting Date:	
Total Fee:	
Date Received:*	
Received By:	

PRJ-73776
07/02/18

*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.