



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: [Signature]

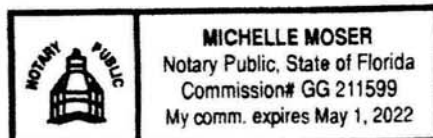
Print Name: Keith B. Ainsworth Denise Ainsworth

Subscribed and sworn before me

This 27 day of June, 2018

[Signature]

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





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Rezoning from C-1 to C-2; Special Use Permit for food processing
 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 FOR DEPARTMENT USE ONLY

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

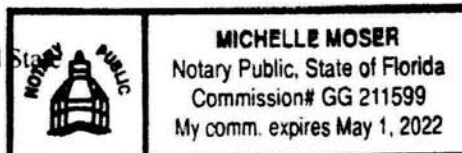
Print Name Keith B. Ainsworth Denise Ainsworth

Subscribed and sworn before me

This 27 day of June, 20 18

Michelle Moser

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



Revised 03/28/16

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.