



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **MSP-74070** APN: _____

Name of Property Owner: Hancock Property, LLC

Name of Applicant: _____

Name of Representative: _____

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: Matthew Kest, Manager of Manager

Subscribed and sworn before me

This _____ day of _____, 20____

Notary Public in and for said County and State

Please See
Attached

PRJ-78842
07/26/18

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

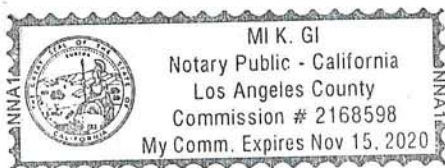
Subscribed and sworn to (or affirmed) before me

on this 28 day of June, 2018,
by Matthew Kest
Date Month Year(1) Matthew Kest

(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 of Notary Public

Seal
Place Notary Seal Above

OPTIONAL

Though this section is 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: _____ Document Date: _____

Number of Pages: _____ Signer(s) Other Than Named Above: _____



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Amendment of Master Sign Plan
 Project Address (Location) 7709 N. El Capitan Way LVNV 89143
 Project Name Haddies Proposed Use Commercial
 Assessor's Parcel #(s) 1251762016 Ward # 6
 General Plan: existing _____ proposed _____ Zoning: existing T-C proposed T-C
 Commercial Square Footage _____ Floor Area Ratio _____
 Gross Acres 1.3 Acres Lots/Units _____ Density _____
 Additional Information _____

PROPERTY OWNER HANCOCK PROPERTY LLC Contact _____
 Address 4221 WILSHIRE BLVD #390 Phone: _____ Fax: _____
 City LA State CA Zip 90010
 E-mail Address _____

APPLICANT DF Durango, LLC Contact Zane Hadfield
 Address 7709 N. El Capitan Way Phone: (702) 371-4309 Fax: (702) 454-1399
 City Las Vegas State NV Zip 89143
 E-mail Address zane@hadfieldbuild.com

REPRESENTATIVE HIGH IMPACT SIGN Contact MARK WHITEHOUSE
 Address 820 S WILLOW PKWY #100 Phone: (702) 336-3336 Fax: (702) 644-0678
 City HENDERSON State NV Zip 89014
 E-mail Address mwhitehouse@highimpactsign.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** _____

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

Print Name Matthew West

Subscribed and sworn before me

This _____ day of _____, 20 _____.

** Owner's signature and consent to this application is conditioned on Applicant's compliance with ECCR's re. this requested waiver and change to the maters signage plan.
 Notary Public in and for said County and State

FOR DEPARTMENT USE ONLY

Case # **MSP-74070**

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.
 07/26/18

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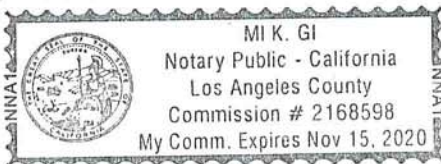
Signature of Document Signer No. 1_____
Signature of Document Signer No. 2 (if any)

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 5 day of June, 2018
by _____ Date _____ Month _____ Year _____(1) Matthew Kest(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 of Notary Public

Seal
Place Notary Seal Above

OPTIONAL

Though this section is 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: Application/Petition Form Document Date: 6/05/18
Number of Pages: 1 Signer(s) Other Than Named Above: _____

MSP-74070