



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-64491** APN: 162-06-301-002

Name of Property Owner: Douglas B. Kays, et al

Name of Applicant: Glenn Rubin

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: _____

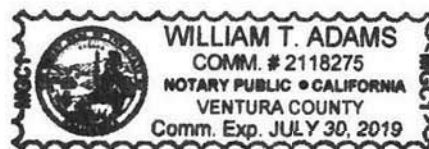
Signature of Property Owner: Douglas B. Kays

Print Name: Douglas B. Kays

Subscribed and sworn before me

This 21 day of APRIL, 2016

William T. Adams
Notary Public in and for said County and State





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: _____

Project Address (Location) 1717 S. Decatur Blvd., Las Vegas, NV

Project Name Scooter Nation

Proposed Use sales/service*

Assessor's Parcel #(s) 162-06-301-002

Ward # 3

General Plan: existing _____ proposed _____ Zoning: existing _____ proposed _____

Commercial Square Footage 135,000 ☒ Floor Area Ratio 4.78 %

Gross Acres _____ Lots/Units _____ Density _____

* Additional Information Sales + Service of Scooters and personal recreational vehicles in an existing indoor swap meet/mall.

PROPERTY OWNER Douglas B. Kays, et al

Contact Doug Kays

Address P.O. Box 29071

Phone: 300 805 877-8261 Fax: 392-4314

City Las Vegas

State NV Zip 89126

E-mail Address DKays@DougKays.com

APPLICANT Glenn Rubin

Contact _____

Address 6384 Covenant Crest Ct

Phone: 702-965-2450 Fax: 702-331-3131

City Las Vegas

State NV Zip 89131

E-mail Address lisa@az2closeouts.com

REPRESENTATIVE Same as Applicant Contact _____

Address _____

Phone: _____ Fax: _____

City _____

State _____ Zip _____

E-mail Address _____

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 owner or agent fully authorized by the owner to make this submission, as indicated by the owner's signature below.

Property Owner Signature* Douglas B. Kays

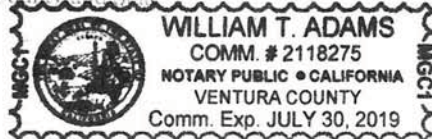
Print Name Douglas B. Kays

Subscribed and sworn before me

This 21 day of APRIL, 20 16

William T. Adams

Notary Public in and for said County and State



Revised 10/27/08

FOR DEPARTMENT USE ONLY

Case # **SUP-64491**

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.

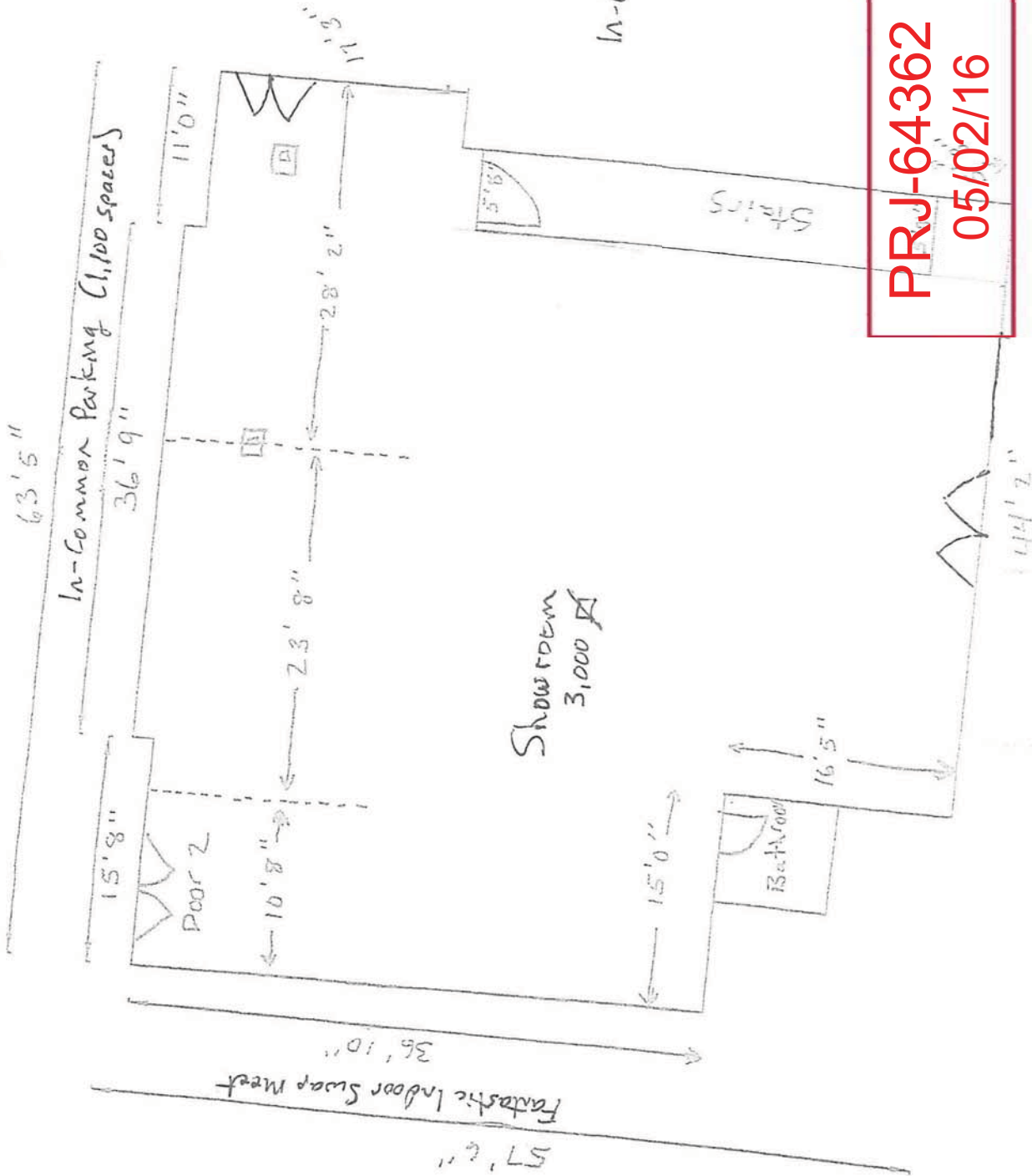
File/Post Application at the Department of Planning Form pdf

PRJ-64362
05/02/16

SUP-64491 - REVISED

Decatur Blvd.

Oakey



In-Common Parking
(1,100 Spaces)

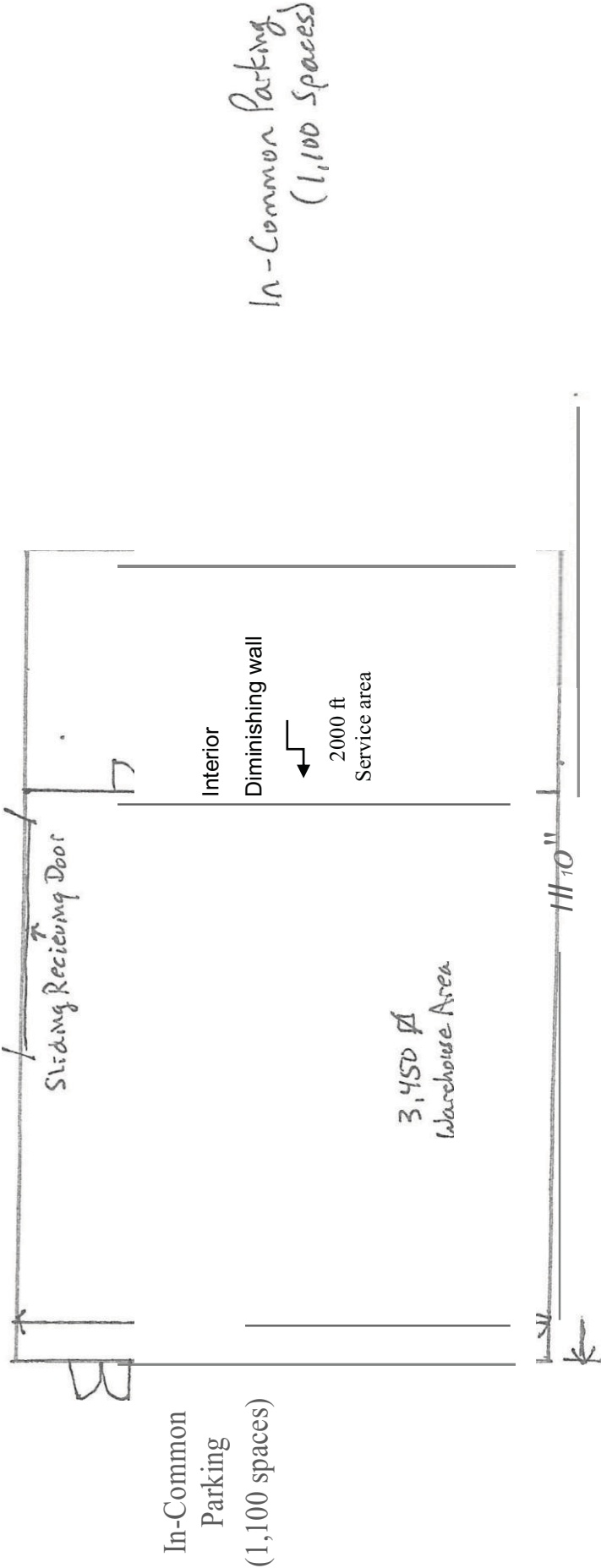
Fantastic Indoor Swap Meet

SUP-64491

(Not To Scale)

Oakey Blvd.

In-Common Parking
(1,100 spaces)



Fantastic Labor Swap Meet

PRJ-64362
05/12/16

SUP-64491 - REVISED