



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: SDR-74813 APN: 140-31-602-002

Name of Property Owner: EMA HOLDINGS L.L.C

Name of Applicant: JESSICA YEROUSHALMI

Name of Representative: JAMES GRINDSTAFF

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: _____

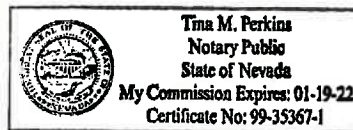
Signature of Property Owner: *Jessica Yeroushalmi*

Print Name: Jessica Yeroushalmi

Subscribed and sworn before me

This 17th day of September, 20 18

Tina M. Perkins
Notary Public in and for said County and State



PRJ-74771
10/17/18



DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: SDPR & Variance
Project Address (Location) 4221 Stewart Ave Las Vegas Nevada
Project Name LEISURE LIVING LOTS Proposed Use
Assessor's Parcel #(s) 140-31-602-002 Ward #
General Plan: existing proposed Zoning: existing R-MHP proposed R-MHP
Commercial Square Footage Floor Area Ratio
Gross Acres 1.7 Lots/Units 13 Density
Additional Information 19.06.130 CLV CODE

PROPERTY OWNER EMA HOLDINGS L.L.C Contact Jessica Yeroushalmi
Address 8965 S EASTERN AVE #120B Phone: 461-9711 Fax:
City LAS VEGAS State NV Zip 89123
E-mail Address onyxnv@gmail.com

APPLICANT EMA HOLDINGS L.L.C Contact Jessica Yeroushalmi
Address 8965 S EASTERN AVE #120B Phone: 461-9711 Fax:
City LAS VEGAS State NV Zip 89123
E-mail Address onyxnv@gmail.com

REPRESENTATIVE James Grindsatff Contact
Address 8965 S EASTERN AVE #120B Phone: 275-2322 Fax:
City LAS VEGAS State NV Zip 89123
E-mail Address ONYXNV. James@gmail.com

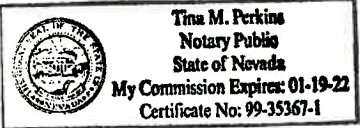
I certify that I am the applicant and that the information submitted with this application is true and accurate to the best of my knowledge and belief. I understand that the City is not responsible for inaccuracies in information presented, and that inaccuracies, false information or incomplete application 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* [Signature]

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

Subscribed and sworn before me
This 17th day of September, 2018
[Signature]

Notary Public in and for said County and State



FOR DEPARTMENT USE ONLY

Case # SDR-74813
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.
[Stamp: SDR-74813 10/17/18]