DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: SUP-74127 APN: 125-33-114-016

Name of Property Owner: Adam Gordon

Name of Applicant: Adam Gordon

Name of Representative: Same as Above

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: Adam Gordon

Print Name: Adam Gordon

Subscribed and sworn before me

This 31st day of July, 2018

_____

Notary Public in and for said County and State

THOMAS ENGLUND
Notary Public State of Nevada
County of Clark
APPT. NO. 00-39982-1
My App. Expires April 8, 2020

Revised 11-14-06

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PRJ-74071
08/02/18

DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: SUP

Project Address (Location) 5400 IRISH SPRING ST. LAS VEGAS, NV 89149

Project Name 5400 IRISH SPRING STREET-STRR-SUP Proposed Use STR

Assessor's Parcel #(s) 125-33-114-016 Ward # 4

General Plan: existing ✓ proposed ____ Zoning: existing ✓ proposed ____

Commercial Square Footage 2440 Floor Area Ratio ____

Gross Acres 0.20 Lots/Units 1 Density ____

Additional Information ____

PROPERTY OWNER Gordon Family Trust Contact Adam Gordon

Address 5400 Irish Spring St. Phone: (702) 493-5949 Fax: (888) 882-0625

City Las Vegas State NV Zip 89149

E-mail Address adamgordon@cox.net

APPLICANT Same as Above Contact Adam Gordon

Address 185 Carthage St. Phone: SAME Fax: SAME

City Henderson State NV Zip 89074

E-mail Address adamgordon@cox.net

REPRESENTATIVE SAME AS ABOVE Contact ____

Address ____ Phone: ____ Fax: ____

City ____ State ____ Zip ____

E-mail Address ____

Property Owner Signature* Adam Gordon

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

Print Name Adam Gordon

Subscribed and sworn before me

This 31st day of JULY, 20 18.

Notary Public in and for said County and State

THOMAS ENGLUND
Notary Public State of Nevada
County of Clark
APPT. NO. 00-39982-1
My App. Expires April 8, 2020

FOR DEPARTMENT USE ONLY

Case #	SUP-74127
Meeting Date:	
Total Fee:	
Date Received:*	
Received By:	

*The application will not be deemed complete until the submitted material has been reviewed by the Department of Planning for consistency with applicable sections of the Zoning Ordinance.

PRJ-74071
08/02/18

Revised 10/27/08

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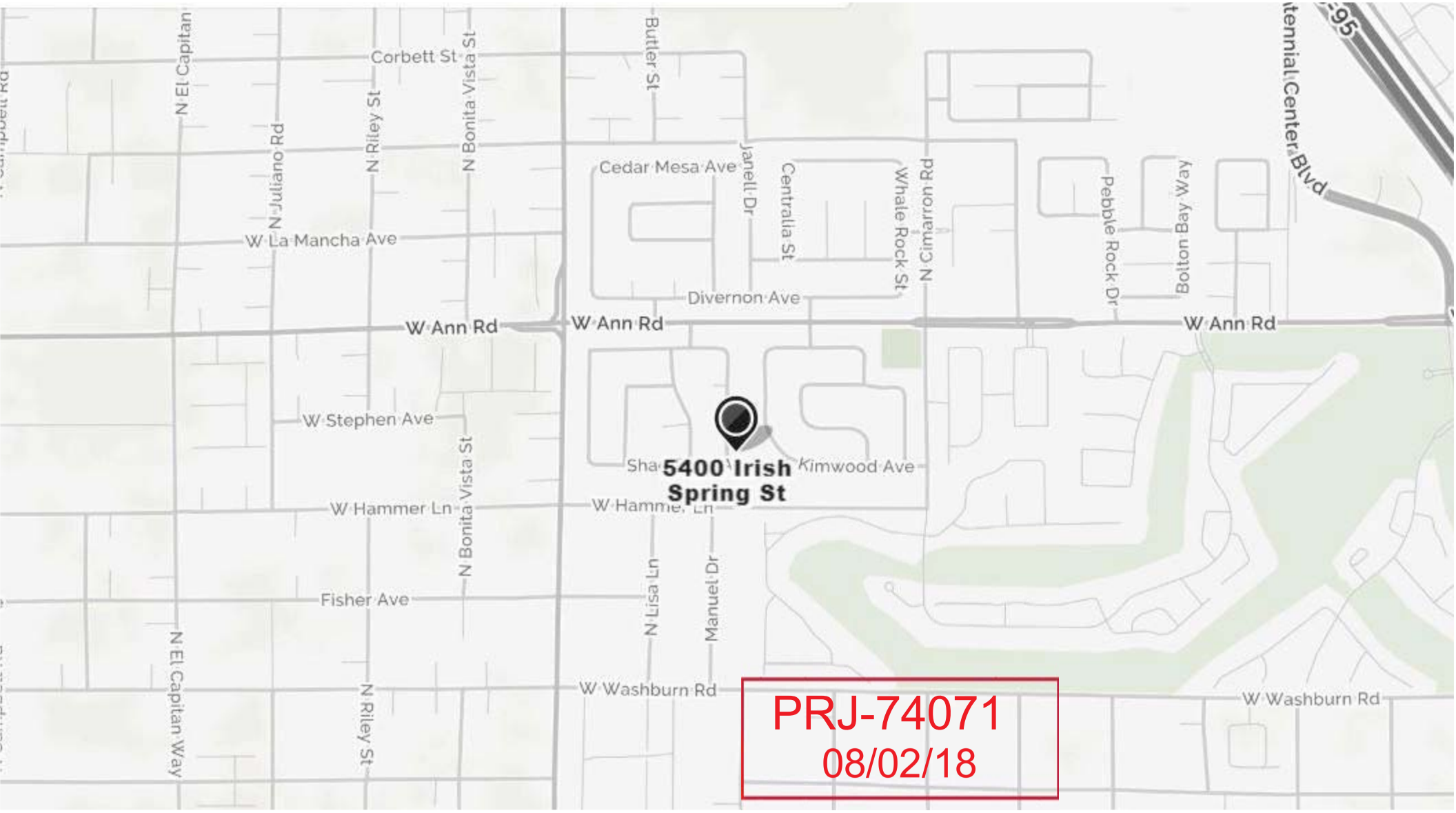
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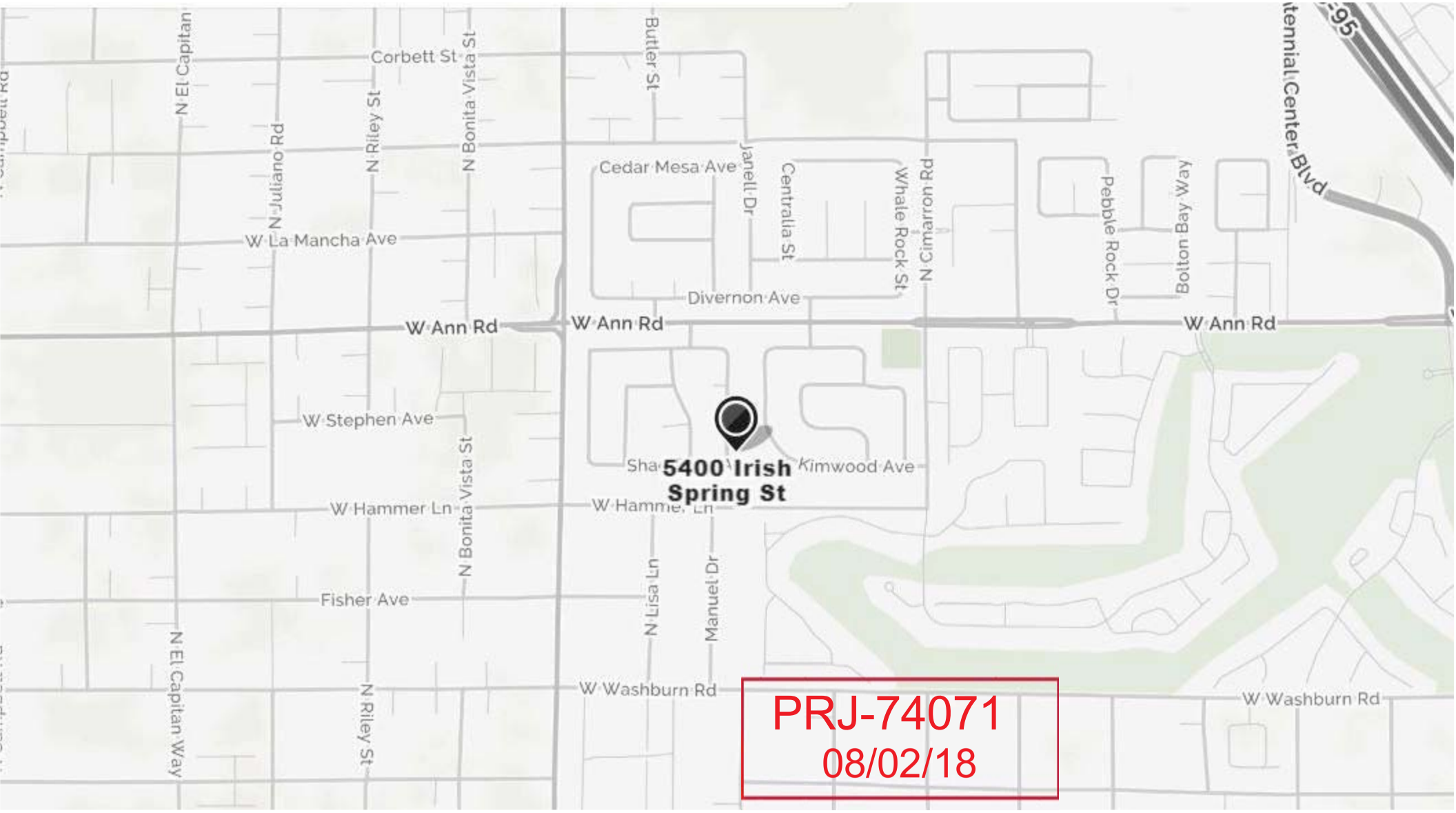
N El Capitan
N Juliano Rd
N Riley St
N Bonita Vista St
Butler St
Janell Dr
Centralia St
Whale Rock St
N Cimarron Rd
Pebble Rock Dr
Bolton Bay Way
Tennial Center Blvd
Cedar Mesa Ave
W La Mancha Ave
Divernon Ave
W Ann Rd
W Ann Rd
W Ann Rd
W Stephen Ave
5400 Irish Spring St
Kimwood Ave
W Hammer Ln
W Hammer Ln
N Bonita Vista St
N Lisa Ln
Manuel Dr
Fisher Ave
N El Capitan Way
N Riley St
W Washburn Rd
W Washburn Rd
PRJ-74071
08/02/18

SUP-74127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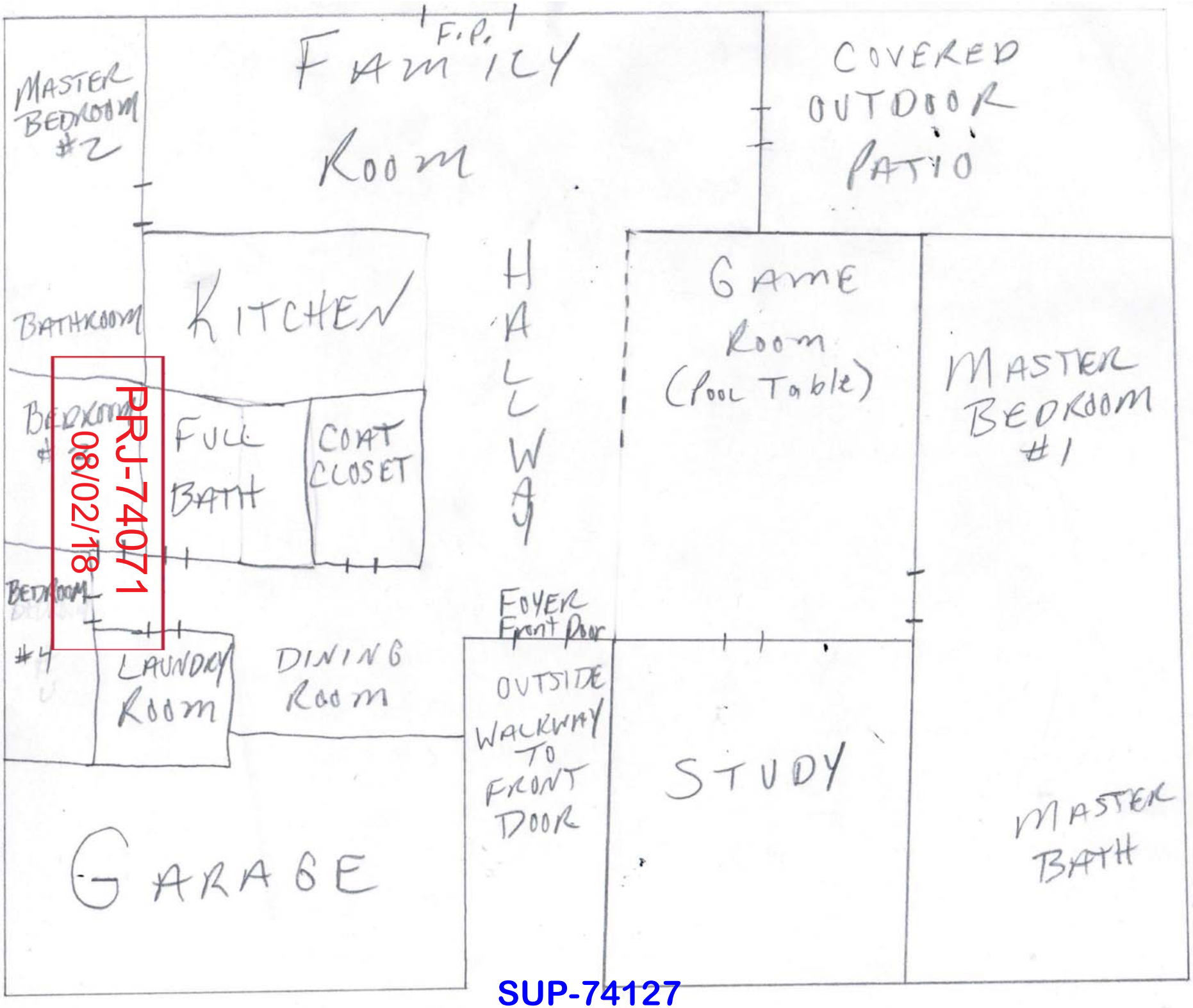
F.P.
FAMILY
ROOM
MASTER BEDROOM #2
COVERED OUTDOOR PATIO
KITCHEN
BATHROOM
HALLWAY
GAME ROOM (Pool Table)
MASTER BEDROOM #1
BEDROOM #3
FULL BATH
COAT CLOSET
BEDROOM #4
LAUNDRY ROOM
DINING ROOM
FOYER Front Door
OUTSIDE WALKWAY TO FRONT DOOR
STUDY
GARAGE
MASTER BATH
PRJ-74071
08/02/18
SUP-74127