



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

SUP-74781

Case Number: PRJ-74513 APN: 162-01-201-006 & 007

Name of Property Owner: 2800 FREMONT LLC

Name of Applicant: AMADOR BENGOCHEA

Name of Representative: Lebene Ohene | Brown, Brown & Premsrut

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: _____

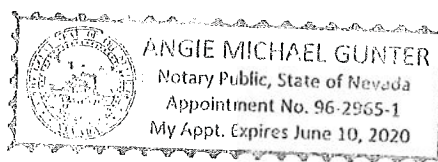
Signature of Property Owner: _____

Print Name: AMADOR BENGOCHEA

Subscribed and sworn before me

This 25th day of September, 20 18

Angie Michael Gunter
Notary Public in and for said County and State





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: SUP|SDR
Project Address (Location) NE Corner of Oakey Blvd and Atlantic St.
Project Name Showboat Redevelopment Project Proposed Use _____
Assessor's Parcel #(s) 162-01-201-006 & 007 Ward # 3
General Plan: existing C | GC proposed _____ Zoning: existing C-2 proposed _____
Commercial Square Footage _____ Floor Area Ratio _____
Gross Acres 25.55 Lots/Units _____ Density _____
Additional Information This project has multiple uses. See attached drawings for more information.

PROPERTY OWNER 2800 Fremont LLC Contact AMADOR BENGOCHEA
Address 3030 S DURANGO DRIVE Phone: (702) 366-1605 Fax: (702) 898-2126
City LAS VEGAS State NV Zip 89117
E-mail Address CHICHIB@BENTAR.COM

APPLICANT 2800 FREMONT LLC Contact AMADOR BENGOCHEA
Address 3030 S DURANGO DRIVE Phone: (702) 366-1605 Fax: (702) 898-2126
City LAS VEGAS State NV Zip 89117
E-mail Address CHICHIB@BENTAR.COM

REPRESENTATIVE Brown, Brown & Premsrirut Contact Lebene Ohene
Address _____ Phone: _____ Fax: _____
lohene@brownlawlv.com
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 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 AMADOR BENGOCHEA

Subscribed and sworn before me

This 25 day of SEPTEMBER, 2018

[Signature]

Notary Public in and for said County and State



Revised 03/28/16

FOR DEPARTMENT USE ONLY

Case # **SUP-74781**

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.

PR-74781-13
10/18/18