



DEPARTMENT OF PLANNING

STATEMENT OF FINANCIAL INTEREST

Case Number: **SUP-74838** APN: 125-20802-003

Name of Property Owner: Isaiah 55:11 Series Micah 6:8 Investments, LLC

Name of Applicant: Isaiah 55:11 Series Micah 6:8 Investments, LLC

Name of Representative: Kaempfer Crowell -- Tony Celeste

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: Barbara A. Lawson

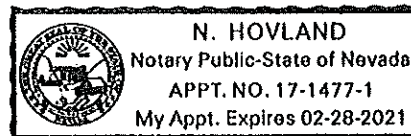
Print Name: Barbara Lawson

State of NV, County of Clark
Subscribed and sworn before me

This 18th day of October, 2018

N. Hovland

Notary Public in and for said County and State





DEPARTMENT OF PLANNING

APPLICATION / PETITION FORM

Application/Petition For: Special Use Permit and Waiver for Gaming
 Project Address (Location) SWC Rome Blvd. and Riley Street
 Project Name McFaddens Tavern Proposed Use Tavern
 Assessor's Parcel #(s) 125-20-802-003 Ward # 6-Flore
 General Plan: existing TC proposed n/a Zoning: existing TC proposed n/a
 Commercial Square Footage 3,347 Floor Area Ratio _____
 Gross Acres 41.13+/- Lots/Units 1 Density _____
 Additional Information See attached justification letter

PROPERTY OWNER Isalah 55:11 Series Micah 6:8 Investments, LLC Contact n/a
 Address 10420 Designata Avenue Phone: (000) 000-0000 Fax: (000) 000-0000
 City Las Vegas State NV Zip 89135
 E-mail Address n/a

APPLICANT Isalah 55:11 Series Micah 6:8 Inv, LLC Contact n/a
 Address 10420 Designata Avenue Phone: (000) 000-0000 Fax: (000) 000-0000
 City Las Vegas State NV Zip 89135
 E-mail Address n/a

REPRESENTATIVE Kaempfer Crowell Contact Tony Celeste
 Address 1980 Festival Plaza Drive #650 Phone: (702) 792-7000 Fax: (702) 796-7181
 City Las Vegas State NV Zip 89135
 E-mail Address AJC@kcnvlaw.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* Barbara A. Lawson

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

Print Name Barbara Lawson

State of NV County of Clark
 Subscribed and sworn before me

This 18th day of October, 20 18.

Notary Public

Notary Public in and for said County and State



N. HOVLAND
 Notary Public-State of Nevada
 APPT. NO. 17-1477-1
 My Appt. Expires 02-28-2021

Revised 03/28/16

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FOR DEPARTMENT USE ONLY

Case # **SUP-74838**

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.

PRJ-74772
 10/22/18

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