



# DEPARTMENT OF PLANNING

## Application / Petition Form & Statement of Financial Interest

### Department Use

Case #
Meeting Date
Total Fee
Received By/Date

Case Type (Special Use Permit, Rezoning, Variance, Site Development Plan Review, etc)

Variance

Project Address (Location) 10000 Hidden Knoll Ct

Project Name Mangafas

Proposed Use

Assessor's Parcel #(s) 16307415011, 16307415012

Ward #

General Plan: Existing

Proposed

Zoning: Existing

Proposed

Additional Information

Property Owner Mangafas Revocable Trust

Contact

N/A

Address 10000 Hidden Knoll Ct

City Las Vegas

State NV

Zip 89117

E-mail

Phone

Applicant Eleftheria Mangafas

Contact

908-217-5944

Address 10000 Hidden Knoll Ct

City Las Vegas

State NV

Zip 89117

E-mail tmangafas@gmail.com

Phone

908-217-5944

Representative Proficient Patios

Contact

Jessica Lane

Address 3310 S Valley View Blvd

City Las Vegas

State NV

Zip 89102

E-mail runner@proficientpatios.com

Phone

702-254-6179 ext. 123

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)

Partner(s)

- 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 the application, or the lessee or agent fully authorized by the owner to make this submission, as indicated by the owner's signature below.
- Application will not be deemed complete until the submitted materials have been reviewed by Department of Planning for consistency with the Zoning Ordinance.

Property Owner Signature

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

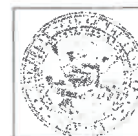
Print Name

Eleftheria Mangafas

Subscribed and sworn before me

This 2nd day of August, 2023

Notary Public in and for said County and State

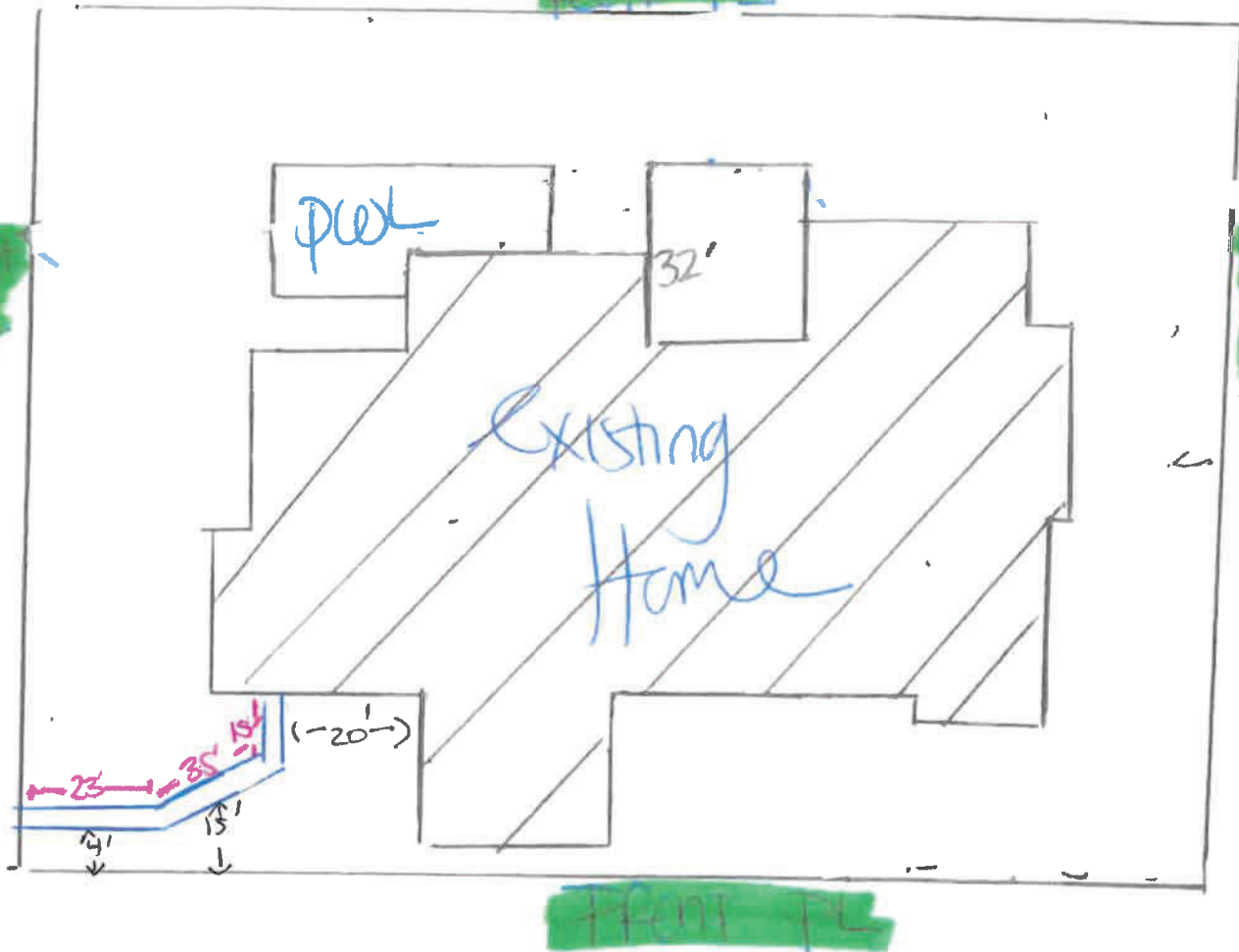


Olivia F. [Signature]  
NOTARY PUBLIC  
STATE OF NEVADA  
Appt. No. 21-3240-01  
My Appt. Expires: May 15, 2025

23-0329

08/22/2023

# Proficient Patios & BACKYARD DESIGNS



Name:

MANGAFAS

Address:

10000 Hidden Knoll Ct.

Description:

Install a CMU wall, 5' in height,  
6" in width By 73' in length

23-0329  
08/22/2023

3310 S. Valley View Blvd. Las Vegas, NV 89102 Office (702) 254-6179 Fax (702) 255-7084 Lic #065168

- Removing existing fence + replacing it  
w/ CMU wall. (Attached photos)



23-0329  
08/22/2023