



# 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) Special Use Permit

Project Address (Location) 1181 South Buffalo Drive, Las Vegas, NV 89117

Project Name Beer and Wine on Premise Proposed Use \_\_\_\_\_

Assessor's Parcel #(s) 16304510010 Ward # 2

General Plan: Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Zoning: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

Additional Information \_\_\_\_\_

Property Owner 1151 S Buffalo Dr. LLC Contact Tonette Martinez

Address 1151 South Buffalo Drive #220 City Las Vegas State NV Zip 89117

E-mail tonette@realonyx.com Phone (702) 820-1417

Applicant Amedeo Pizza Italian Cafe Contact Suren Sahakyan

Address 1181 South Buffalo Drive #115 City Las Vegas State NV Zip 89117

E-mail amedeo1181@gmail.com Phone (702) 468-9091

Representative Suren Sahakyan Contact Suren Sahakyan

Address 774 Hillhopper Avenue City Las Vegas State NV Zip 89128

E-mail S-sahakyan2003@yahoo.com Phone (702) 468-9091

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 [Signature]

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

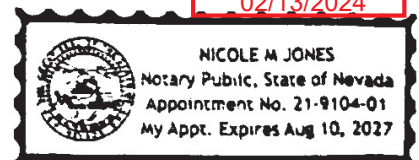
Print Name Tonette Martinez as agent for 1151 S Buffalo Dr. LLC

Subscribed and sworn before me

This 8th day of February, 2024

[Signature]  
Notary Public in and for said County and State

**24-0088**  
02/13/2024

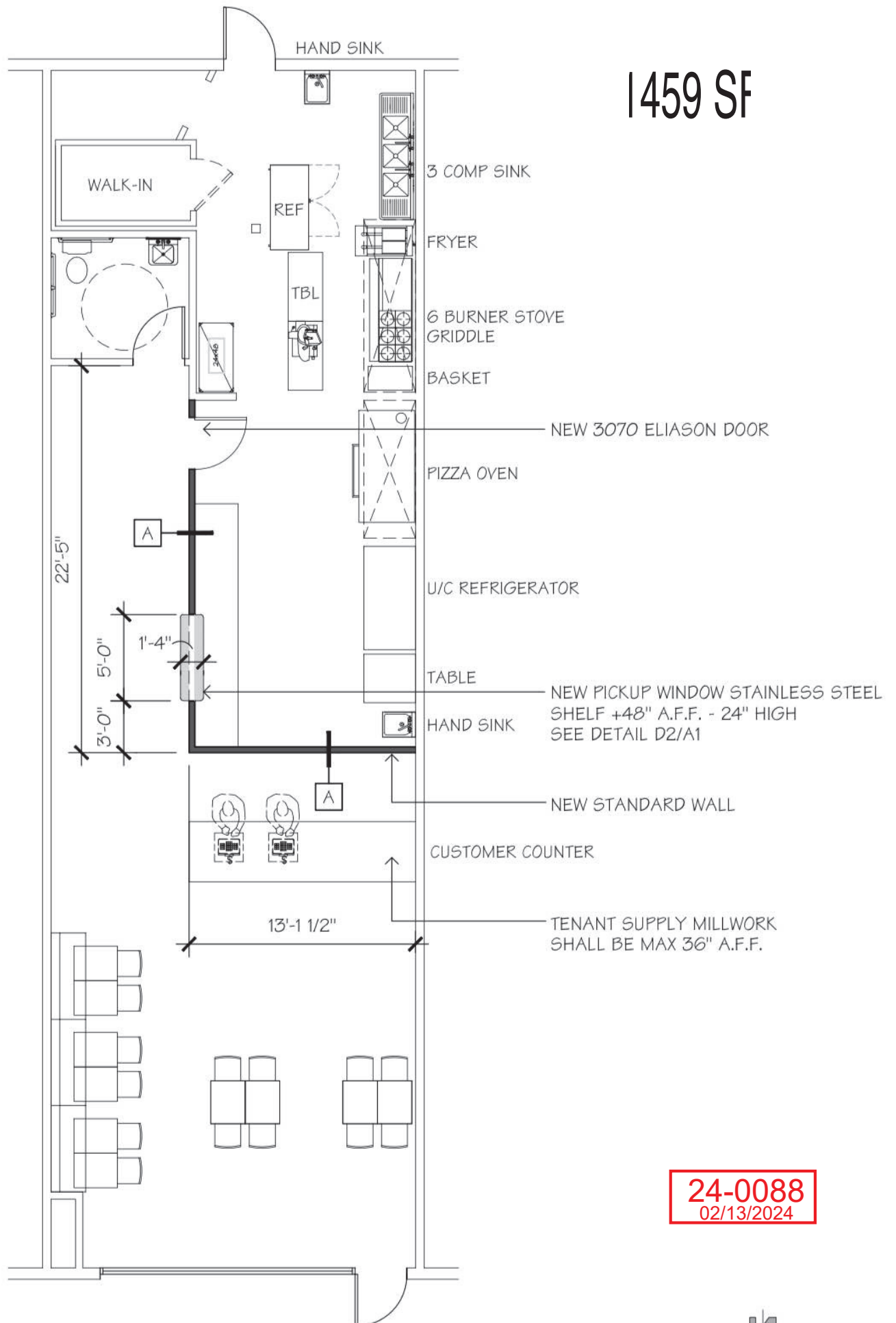


# Site Plan

■ Vacant ■ NAP



1151			
1ST FLOOR			
Suite	Tenant	SF	
1151-100	VACANT	+/- 1,534	
1151-110	Well Groomed Pets	+/- 1,566	
1151-130	Nikki Bee Tanning	+/- 1,560	
2ND FLOOR			
Suite	Tenant	SF	
1151-201	VACANT	+/- 450	
1151-202	VACANT	+/- 500	
1151-203	VACANT	+/- 420	
1151-204	VACANT	+/- 600	
1151-220	Real Onyx Property Management	+/- 980	
1151-230	VACANT	+/- 1,200	
1171			
Suite	Tenant	SF	
1171-100	Vitality Family Chiropractic	+/- 1,100	
1171-105-110	PRSVR Gym	+/- 2,320	
1171-115	Bluerose Nail Spa	+/- 1,210	
1181			
Suite	Tenant	SF	
1181-105	Prestige Nail School	+/- 2,800	
1181-115	Amadeo Italian Kitchen	+/- 1,459	
1181-120	<b>24-0088</b>	+/- 2,772	
1181-130	Rock Star	+/- 5,973	
1181-135-150	Int World	+/- 4,650	



24-0088  
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