



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) REZONING, VARIANCE & SITE DEVELOPMENT PLAN

Project Address (Location) 4839 & 4859 E OWENS AVENUE

Project Name AVIANA AT OWENS

Proposed Use RESIDENTIAL

Assessor's Parcel # (s) 140-29-510-009 & 010

Ward # 3

General Plan: Existing Medium Proposed Medium **Zoning:** Existing R-2 Proposed R-3

Additional Information 24 SINGLE FAMILY ATTACHED RESIDENTIAL UNITS

Property Owner Chia Trinidad Living Trust & Arnold Manaog

Contact SALLY CHIA

Address 3930 Jacob Lake Circle

City LAS VEGAS **State** NV **Zip** 89118

E-mail sallyxchia@gmail.com

Phone 267-252-9263

Applicant VITA BONA, LLC

Contact CINDY BRADEN

Address 2885 E. QUAIL AVENUE

City LAS VEGAS **State** NV **Zip** 89120

E-mail clb3164@gmail.com

Phone 702-497-5070

Representative LONDON CHRISTOPHERSON

Contact _____

Address 2885 E. QUAIL AVENUE

City LAS VEGAS **State** NV **Zip** 89120

E-mail lchristopherson@novusvi.com

Phone 702-521-7021

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 _____

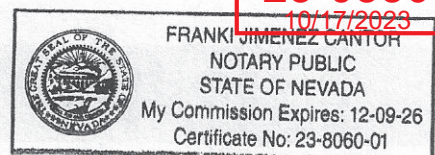
An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps and Parcel Maps

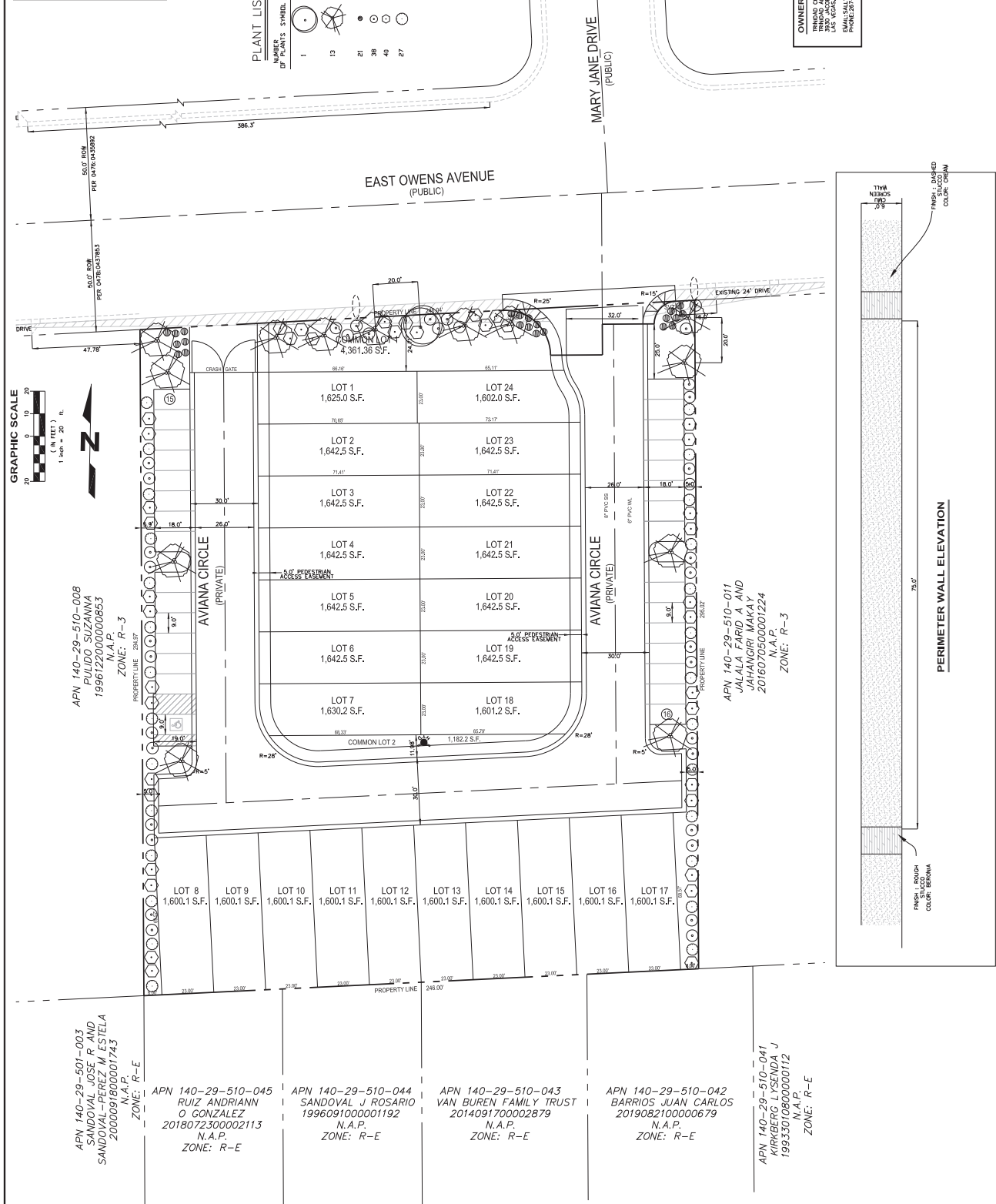
Print Name ARNOLD MANAOG / SALLY CHIA / ALAN TRINIDAD

Subscribed and sworn before me

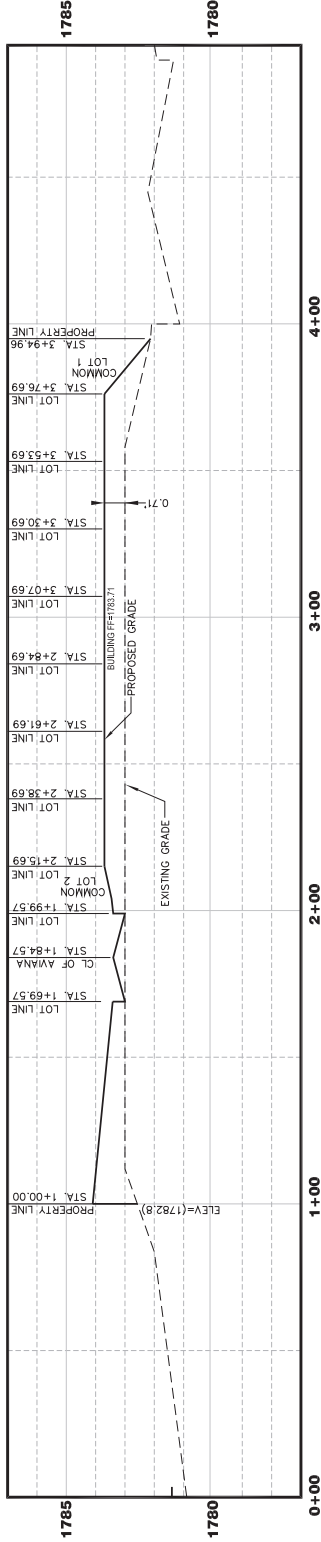
This 27th day of July, 20 23

Notary Public in and for said County and State



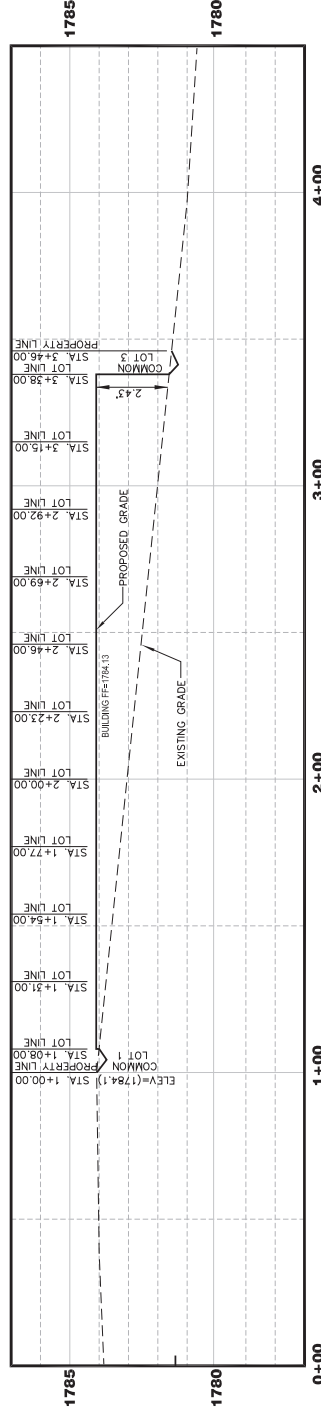


HIGHEST PROPOSED GRADE = 1784.1
LOWEST ADJACENT GRADE = 1781.4
GRADE DIFFERENCE = 2.41 FEET



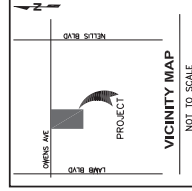
CROSS-SECTION D

HORIZ. SCALE = 1"=20'
VERT. SCALE = 1"=2'



CROSS-SECTION E

HORIZ. SCALE = 1"=20'
VERT. SCALE = 1"=2'



DATE: DEC. 10, 2023
SCALE: 1"=20'

SHEET NUMBER: 2 OF 2

PROJECT: AVIANA AT OWENS
OWENS & NELLIS
LAS VEGAS, NV
APN # 140-29-510-009 & 010

CROSS-SECTIONS

ENGINEER: DCL CONSULTING
2885 EAST QUAIL AVENUE
LAS VEGAS, NEVADA 89120
PHONE: 702-521-7021



NO.	DATE/DESCRIPTION
1	12/18/2023