



DEPARTMENT OF PLANNING

Application / Petition Form & Statement of Financial Interest

Department Use

Case #	
Meeting Date	
Total Fee	
Received By/Date	

23-0266
06/15/2023

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

Project Address (Location) 1150 S Las Vegas Blvd

Project Name Hebron Food Pantry **Proposed Use** _____

Assessor's Parcel #(s) 16203112003 **Ward #** 3-Diaz

General Plan: Existing _____ Proposed _____ **Zoning:** Existing C-2 Proposed C-2

Additional Information _____

Property Owner YSBM Investment, LLC **Contact** Ben Moshe

Address 1820 E Warm Springs Rd Suite 100 **City** Las Vegas **State** NV **Zip** 89119

E-mail admin@mycompanies.com **Phone** 702-471-1118

Applicant Caridad Inc. **Contact** Merideth Spriggs

Address 1150 South Las Vegas Blvd **City** Las Vegas **State** NV **Zip** 89104

E-mail merideth@caridadcharity.com **Phone** (619) 277-4975

Representative Todd Kessler **Contact** _____

Address 1150 S Las Vegas Blvd **City** Las Vegas **State** NV **Zip** 89104

E-mail todd@rgglv.com **Phone** 702-349-7002

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

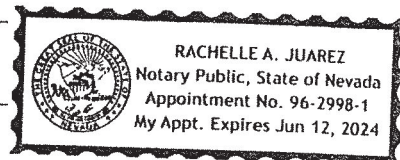
Print Name Yair Ben Moshe

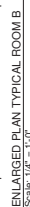
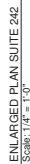
Subscribed and sworn before me

This 15th day of June, 2023

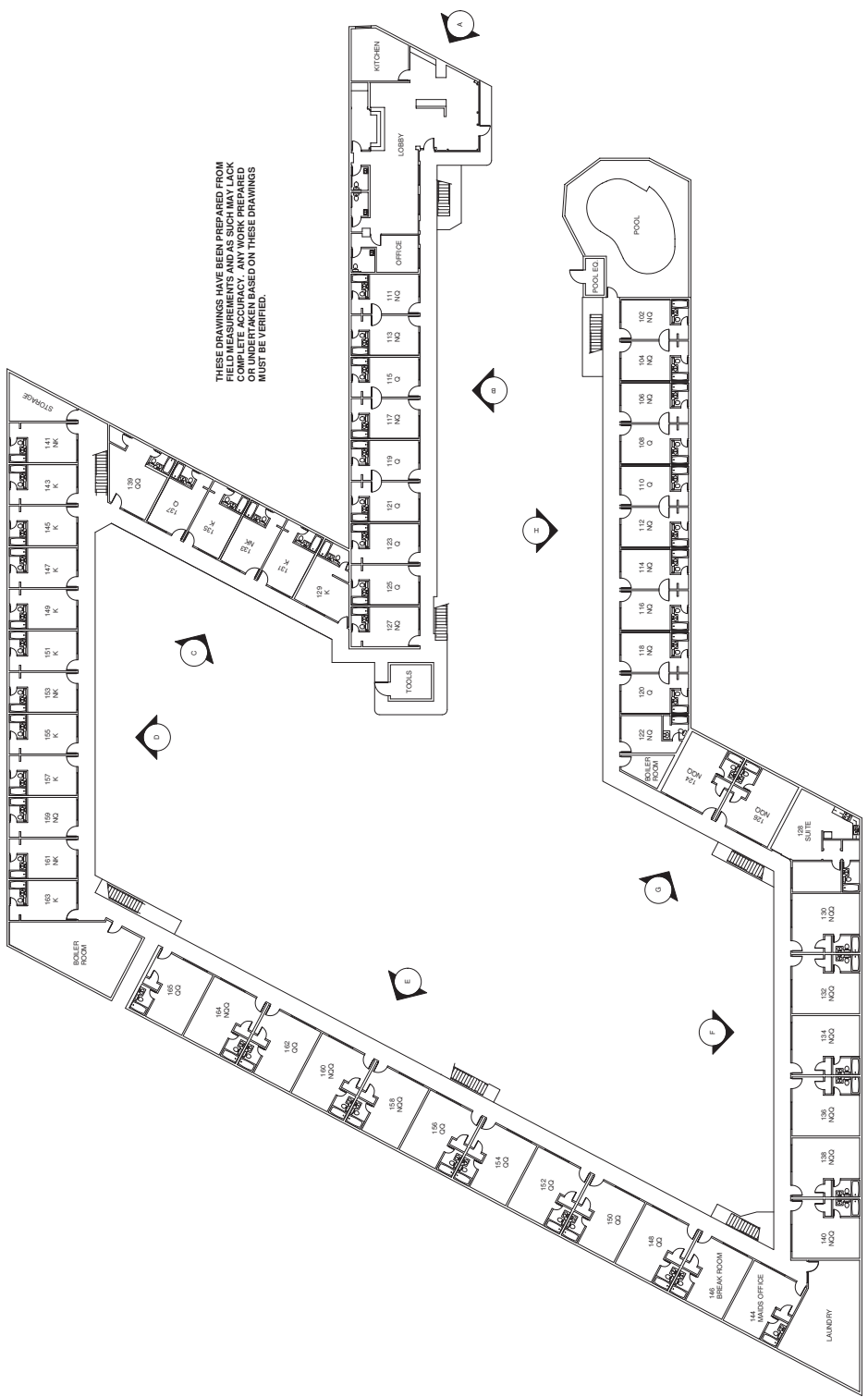
Rachelle A. Juarez

Notary Public in and for said County and State





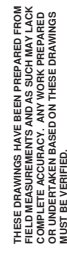
THESE DRAWINGS HAVE BEEN PREPARED FROM
FIELD MEASUREMENTS AND AS SUCH MAY LACK
COMPLETE ACCURACY. ANY WORK PREPARED
OR UNDERTAKEN BASED ON THESE DRAWINGS
MUST BE VERIFIED.



THESE DRAWINGS HAVE BEEN PREPARED FROM
FIELD SURVEY DATA AND ARE NOT TO BE
CONSIDERED COMPLETE. ANY WORK PREPARED
OR UNDERTAKEN BASED ON THESE DRAWINGS
MUST BE VERIFIED.

FIRST FLOOR PLAN
Scale: 1/8" = 1'-0"

23-0265
06/15/2023



SECOND FLOOR PLAN
Scale: 1/16" = 1'-0"

23-0265
06/15/2023