



# 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) 8540 W Lake Mead Blvd #120 Las Vegas NV 89128

Project Name Tomoya Japanese Cuisine Proposed Use \_\_\_\_\_

Assessor's Parcel #(s) 13820521008 Ward # 4-FRANCIS ALLEN

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

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

Property Owner SOUTH SHORES LLC Contact Andrew 310-246-2447 x106

Address 6338 Wilshire Blvd City Los Angeles State CA Zip 90048

E-mail Andrew@cj-park.com Phone \_\_\_\_\_

Applicant Ellen Park Contact Ellen 702-430-3629

Address 8540 W Lake Mead Blvd #120 City Las Vegas State NV Zip 89148

E-mail TOMOYA.lasvegas@gmail.com Phone \_\_\_\_\_

Representative Mun, Yeji Mun & Associates Contact Yeji Mun

Address 8350 W Sahara Ave #160 City Las Vegas State NV Zip 89117

E-mail MUNCPA@MUNCPANS.COM Phone 702-790-1468

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 KAMRAN FARHADI

Subscribed and sworn before me

This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Notary Public in and for said County and State

25-0035  
01/21/2025

CALIFORNIA ALL-PURPOSE CERTIFICATE OF  
**ACKNOWLEDGMENT**

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }

County of LOS ANGELES }

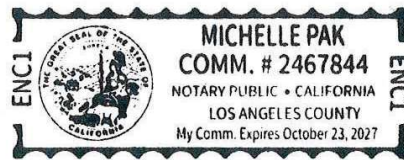
On JANUARY 17, 2025 before me, MICHELLE PAK, NOTARY PUBLIC,  
(insert name and title of the officer)

personally appeared KAMRAN FARHADI,  
who proved to me on the basis of satisfactory evidence to be the person(s) whose  
name(s) ~~is~~ are subscribed to the within instrument and acknowledged to me that  
~~he~~ she/they executed the same in ~~his~~ her/their authorized capacity(ies), and that by  
~~his~~ her/their signature(s) on the instrument the person(s), or the entity upon behalf  
of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

  
Notary Public Signature



(Seal)

OPTIONAL INFORMATION

DOCUMENT

DEPARTMENT OF PLANNING APPLICATION  
(name or type of document)

1  
(number of pages)

                      
(document date)

SIGNER CAPACITY

PROPERTY OWNER  
(capacity claimed by the signer)

NOTICE

THE NOTARY PUBLIC DOES NOT  
CERTIFY THE AUTHORITY OR  
CAPACITY OF THE SIGNER

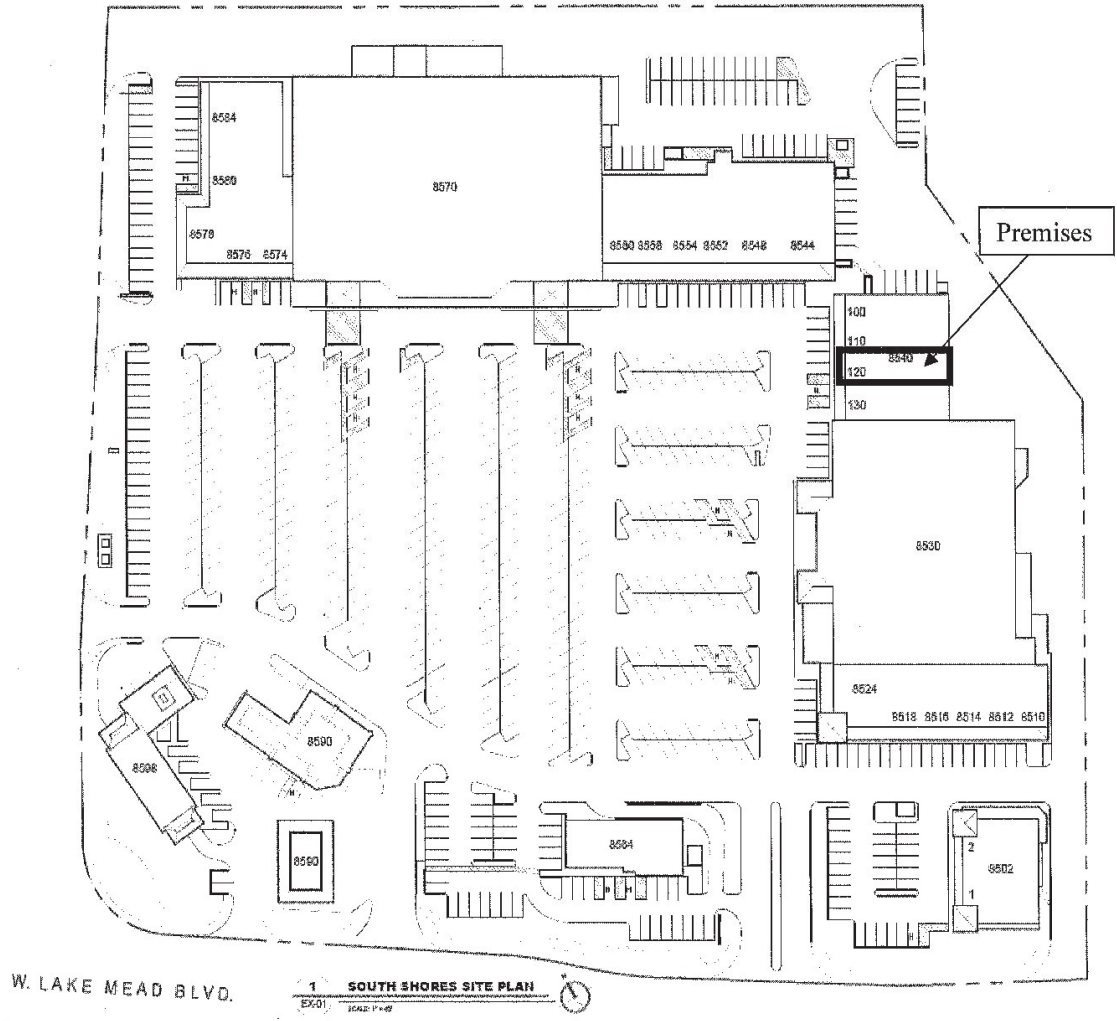
25-0035  
2025



EXHIBIT "E"

SITE PLAN

SITE PLAN FOR:  
**THE SOUTH SHORES SHOPPING CENTER**  
8502, 8510, 8530, 8544, 8564, 8570, 8574, 8590 WEST LAKE MEAD BOULEVARD  
LAS VEGAS, NEVADA 89128



Landlord Initials

*AP*

25-0035  
01/21/2025



G:\DRAWINGS\Project-2024\Facade\JSP\correction\JAPANESE\p-20.dwg, 11/6/2024 9:38:57 AM, AutoCAD PDF (General Documentation).pc3

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**TOMOYA**  
**JAPANESE**  
**CUISINE**  
8540 W LAKE MEAD BLVD ST120  
LAS VEGAS NV. 89128  
APN. 13820521008

TOMOYA  
JAPANESE  
CUISINE

8540 W LAKE MEAD BLVD ST120  
LAS VEGAS NV. 89128  
APN. 138.0521008

DATE CODE

ALL CONSTRUCTION SHALL COMPLY WITH,  
BUT SHALL NOT BE LIMITED TO THE  
LATEST EDITION OF THE INTERNATIONAL  
CODES AND STANDARDS OF:  
WITH LOCAL EXEMPT AMENDMENTS  
2018-INTERNATIONAL BUILDING CODE (IBC)  
2018-INTERNATIONAL FIRE CODE (IFC)      IBC CODE (IBC)  
2018-NATIONAL ELECTRICAL CODE (NEC)  
2017-NATIONAL PLUMBING CODE (NPC)  
2018-UNIFORM MECHANICAL CODE (UMC)  
2018-UNIFORM PLUMBING CODE (UPC)  
ANSI A117.1 - 2009 ACCESSIBLE AND  
USABLE BUILDINGS AND FACILITIES  
2010-ADA

INDEX OF DRAWINGS:

SHEET NO. DESCRIPTIONS  
COVER SHEET & EX FLOOR PLAN  
A-1-1 DETAILS  
A-2-1 FLOOR PLAN  
A-3-1 REFLECTED CEILING PLAN

PLUMBING

DESIGN DATA:  

ZONE AREA NETWORK	OS	1-2	1' IF
OCCUPANCY CATEGORY	A-2	1-2	1' IF
TYPE OF CONSTRUCTION	I-B	EXISTING	
ALARM PROTECTION	NES	EXISTING	
BASIC ALLOWABLE AREA	RX00		
FLOOR AREA	1368 SF		
AREA / FLOOR FOR SUPPLY AIR	PROVIDED 2		
ACTUAL AREA INTAKE	425 SF / 15 = 28.33		
EXIT REQUIRED 1	741 SF / 200 = 3.71		
TOTAL OCCUPANCY	50 SF / 15 = 3.33		
COMMON AREAS	741 SF / 200 = 3.71		
WATER	50 SF / 15 = 3.33		

GENERAL CONTRACTOR:

ELECTRICAL:

Mechanical/Plumbing:

TOMOYA  
JAPANESE  
CUISINE

LAS VEGAS NV. 89128  
APN 138.0521008

Description

By

Date

Rev

Drawn by:

Checked By:

Date:

Project Number:

Sheet Title:

Cover Sheet

Sheet Number:

25-0035

01/21/2025

CEILING GRID

2x4 AIR RETURN

1x4 LAT-IN AGRICULTURAL LIGHTING BULBS

1x12 TZW

2x2 LAT-IN AGRICULTURAL Bulb 2 - Medium BE

17W REFRACT TO LED

2x4 LAT-IN AGRICULTURAL Bulb 2 - Medium BE

17W REFRACT TO LED

TRACK LIGHT

SUPPLY AIR DIFFUSER

EXHAUST FAN

SUPPLY AIR DIFFUSER

CAN DOWN LIGHT W/ LED PAR 7MMIT

ECO MAKE UP SUPPLY AIR DIFFUSER

ACCESS UT W/ LED PAR 7MMITS

EMERGENCY LIGHTING W/ 2 X 6V 5W RECHARGEABLE BASE LAMPS FOR EMERGENCY

RECHARGEABLE LIGHT WITH (EMER) 15 WATTS AT EMERGENCY OPERATION

WALL MOUNT LED ZOW

RECEPTACLES

EXISTING RECEPTACLES

GROUND FAULT INTERRUPT OUT.

EXISTING GROUND FAULT INTERRUPT OUT.

PHONE/DATA

SMOKE DETECTOR 5WH W/ BACK UP BATTERY

CABLE TV

SWITCH

3-WAY SWITCH

MOTION DETECTOR PROVIDE 15 AMP OVERCURRENT PROTECT ROOM LESS THAN 500 SF

MD

LC

OS

NOTES:  
1. SUPPLY ALL FLUORESCENT LAMPS TO BE IN THE WARM TEMPERATURE RANGE (EQUIVALENT TO INCANDESCENT LAMPS (0000K))  
2. THESE LAMPS ARE NOT TO BE USED TO CORRECT PUNCH LIST ITEMS.  
3. BASE BID TO INCLUDE 3 LAMPS OF EACH TYPE SPECIFIED ABOVE FOR TENANT STOCK.

PROPOSED AREA

SITE PLAN

DO NOT MODIFY PARKING