



DEPARTMENT OF PLANNING

Application / Petition Form & Statement of Financial Interest

Department Use

Case #	
Meeting Date	
Total Fee	
Received By/Date	

24-0634
12/12/2024

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

Project Address (Location) 750 Rampart Blvd, Suite 8

Project Name Wellness by Kelly **Proposed Use** Wellness Center with massage

Assessor's Parcel #(s) 138-32-312-005 **Ward #** 2

General Plan: Existing _____ Proposed _____ **Zoning:** Existing _____ Proposed _____

Additional Information _____

Property Owner HUKL FVBP Owner, LLC **Contact** n/a
Address 9770 W FLAMINGO RD STE 250 **City** Las Vegas **State** NV **Zip** 89147
E-mail n/a **Phone** 000-000-0000

Applicant Wellness by Kelley **Contact** n/a
Address 10801 W. Charleston Blvd **City** Las Vegas **State** NV **Zip** 89135
E-mail n/a **Phone** 000-000-0000

Representative Kaempfer Crowell **Contact** Jennifer Lavovich
Address 1980 Festival Plaza Dr. #650 **City** Las Vegas **State** NV **Zip** 89135
E-mail apierce@kcnvlaw.com **Phone** 702-792-7048

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

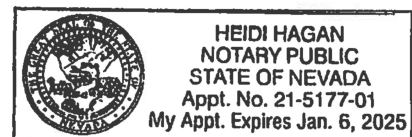
Print Name JOAN SALISBURY

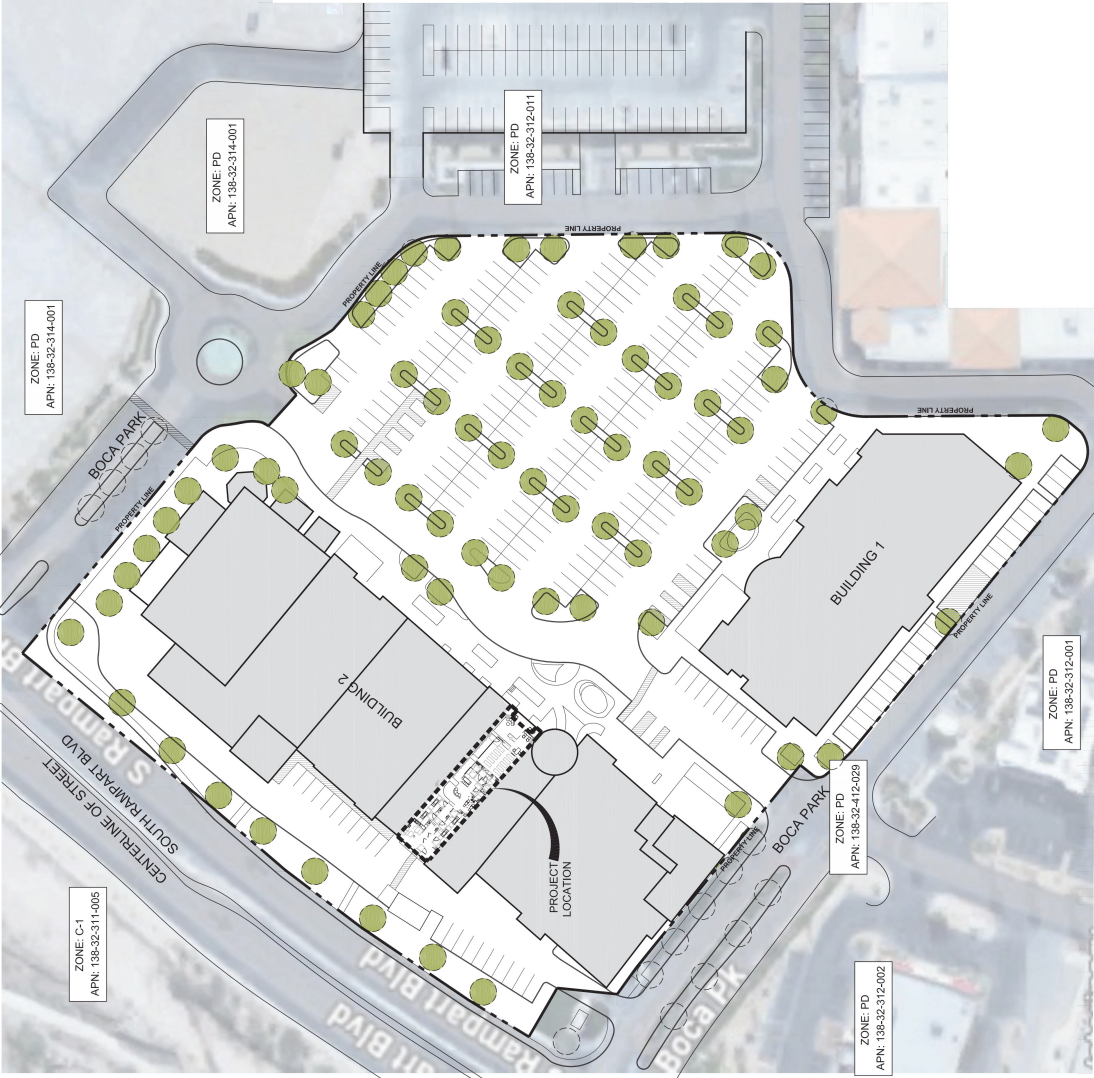
Subscribed and sworn before me

This 5th day of DEC, 2024

Heidi Hagan

Notary Public in and for said County and State





24-0634
12/12/2024

Site Data

JURISDICTION:	CITY OF LAS VEGAS
PARCEL #:	138-32-312-005
ZONING CLASSIFICATION:	PD
BUILDING AREA:	60,000 SF
TENANT IMPROVEMENT AREA:	2,800 SF
PARCEL AREA:	6.04 ACRES
PROPOSED USE:	MESSAGE / HEALTH CENTER / GENERAL PERSONAL SERVICES
NO CHANGE:	NO CHANGE
NO CHANGE:	NO CHANGE
NO CHANGE:	NO CHANGE

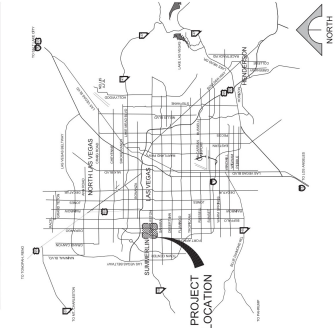
Parking Analysis

SHOPPING CENTER (10.12.17) EXISTING:	- 1 SPACE PER 200 SF
275 STALLS EXISTING	4 REQUIRED
(10.01.1400) LOADING	NO CHANGE
ACCESSIBLE PARKING STALLS EXISTING	8 REQUIRED
18 KBT STALLS PROVIDED	NO CHANGE

Legend

- PROPERTY LINE
- LANDSCAPE - EXISTING TREES

Vicinity Map



Date: November 01, 2024
Scale: 1" = 40'-0"

Floor Plan Legend

EXISTING CONDITION

NEW CONSTRUCTION

Occupancy

SOURCE FOOTAGE

OCCUPANT CLASSIFICATION

OCCUPANT TITLE (USE)

OCCUPANT LOW

SPACE

CALCULATION

OCCUPANTS

EXERCISE ROOMS

LOCKERS

RESTROOMS

RETAIL/SHOP

BUSINESS

RETAIL WALL

RECEPTION / RETAIL

CONSULT OFFICE

GRAB - N-GO

OUTDOOR SEATING

24-0034

2/12/2024

24-0034

2/12/2024

24-0034

2/12/2024

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