



DEPARTMENT OF PLANNING

Application / Petition Form & Statement of Financial Interest

Department Use

| | |
|------------------|--|
| Case # | |
| Meeting Date | |
| Total Fee | |
| Received By/Date | |

24-0232
04/28/2024

Case Type (Special Use Permit, Rezoning, Variance, Site Development Plan Review, etc) Required Review of V-0074-95

Project Address (Location) 7200 W. Lake Mead Blvd

Project Name Billboard signage **Proposed Use** off-premise billboard

Assessor's Parcel #(s) 138-27-502-007 **Ward #** 1

General Plan: Existing _____ Proposed n/a **Zoning:** Existing C-1 Proposed n/a

Additional Information _____

Property Owner 3RPM3, LLC **Contact** n/a

Address 7276 Forest Village **City** Las Vegas **State** NV **Zip** 89113

E-mail n/a **Phone** 000-000-0000

Applicant ~~Randy Black, Sr.~~ Robert R. Black, Sr. **Contact** n/a

Address 10777 Twain Avenue, Ste 300 **City** Las Vegas **State** NV **Zip** 89135

E-mail n/a **Phone** 000-000-0000

Representative Kaempfer Crowell **Contact** Bob Gronauer

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 inaccurate, 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.

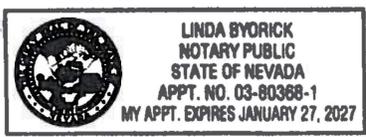
Property Owner Signature _____
An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps and Parcel Maps

Print Name Robert R. Black, Sr.

Subscribed and sworn before me

This 16th day of April, 20 24

Linda Byorick
Notary Public in and for said County and State



INDEPENDENT CHOICE MADE SIMPLE

Nevada's only 5-Star Medicare Advantage Plan



Select Health

Las Vegas Billboards

PTS TRUIS

Real. Local. Play.

50% OFF HAPPY HOUR
5-7PM & 12-2AM

KITCHEN OPEN 24 HOURS

OPEN 24 HOURS

72 00

Bank of Nevada

AMERICAN MORTGAGE

REAL ESTATE TITLE

COMMERCIAL TITLE

SCHWABT BROS

24-0232
6/23/2024



24-0232
04/23/2024