

Print Form



# DEPARTMENT OF PLANNING

## Application / Petition Form & Statement of Financial Interest

### Department Use

Case #
Meeting Date
Total Fee
Received By/Date

24-0645  
12/17/2024

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

**Project Address** (Location) 850 S Durango Drive Suite 100, Las Vegas, Nevada 89145

**Project Name** The Beautiful Event Center **Proposed Use** Banquet Facility Use - Full Liquor

**Assessor's Parcel #**(s) 138-33-401-001 **Ward #** 1

**General Plan:** Existing SC Proposed No Change **Zoning:** Existing C1 Proposed No Change

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

**Property Owner** Steven Traisman Living Trust **Contact** Cynthia Inman  
**Address** c/o Priority One Commercial, 7219 W Sahara Avenue, Suite 100 **City** Las Vegas **State** NV **Zip** 89117  
**E-mail** cinman@poclv.com **Phone** 702-228-7464

**Applicant** The Beautiful Event Center [Owner Regina Jones] **Contact** Regina Jones  
**Address** P O Box 751765 **City** Las Vegas **State** NV **Zip** \_\_\_\_\_  
**E-mail** love@thebeautifulcompany.org **Phone** 725-206-5122 or 323-333-6617 [Cell]

**Representative** Priority One Commercial **Contact** Cynthia Inman  
**Address** 7219 W Sahara Avenue, Suite 100 **City** Las Vegas **State** NV **Zip** 89117  
**E-mail** cinman@poclv.com **Phone** 702-228-7464

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

**Print Name** Cynthia Inman

Subscribed and sworn before me

This Notary Public day of 8th of December, 20 24

Kristin L. Cederlund  
Notary Public in and for said County and State





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12/16/2024

