



DEPARTMENT OF PLANNING

Application / Petition Form & Statement of Financial Interest

Department Use

Case #
Meeting Date
Total Fee
Received By/Date

25-0010
01/13/2025

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

Project Address (Location) 8704 west Charleston Blvd. Suite 101, Las Vegas, NV 89117

Project Name Cafe Landwer

Proposed Use Restaraunt

Assessor's Parcel #(s) 138-32-818-010

Ward # 2

General Plan: Existing Limited Com Proposed Limited Com **Zoning:** Existing C-1 Proposed C-1

Additional Information A restaurant of the Cafe Landwer chain opening its first in Vegas at the Boca Park Plaza

Property Owner Boca Park Marketplace Syndications Group, LLC

Contact James Grindstaff

Address 9030 W. Sahara Ave. suite 422

City Las Vegas **State** NV **Zip** NV

E-mail James.Grindstaff@TripleFive.com

Phone 702-275-2322

Applicant L. Las Vegas LLC

Contact _____

Address 8704 w charleston Blvd

City Las Vegas **State** NV **Zip** 89117

E-mail _____

Phone _____

Representative Amir Mor

Contact _____

Address 10709 Sapphire Vista Ave

City Las vegas **State** NV **Zip** 89144

E-mail Amirmorvegas@gmail.com

Phone 725-233-1284

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 _____

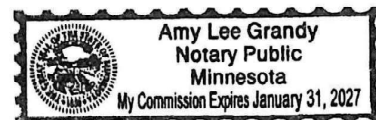
An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps and Parcel Maps

Print Name Jeffrey Dragovich, Vice President of Manager

Subscribed and sworn before me

This 13th day of January, 20 25

Amy P. Grandy
Notary Public in and for said County and State Hennepin County, MN

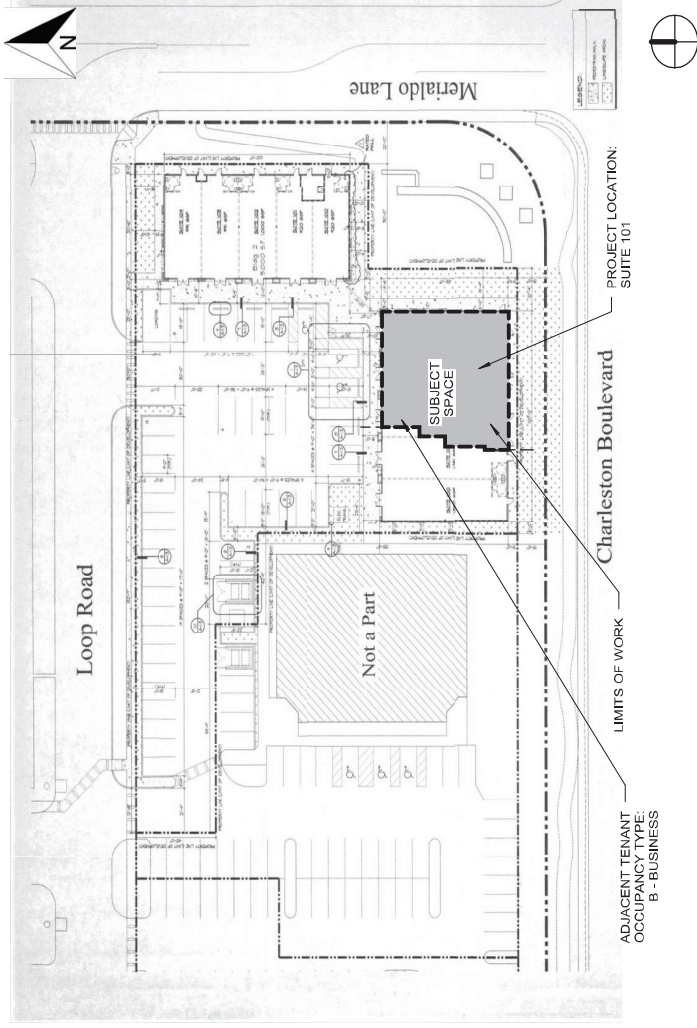


Cafe Landwer

8704 W Charleston Boulevard, Suit #101



SITE PLAN



① SITE PLAN
1" = 50'-0"

Pursuant to Title 19.08 and 19.12, the following parking standards apply:

Parking Requirement				Compliance	
Use	Gross Floor Area or Number of Units	Parking Ratio	Required		Provided
			Regular	Handi-capped	
Shopping Center (existing)	51,172 GFA	1:250 GFA	205		
TOTAL SPACES REQUIRED			205		
Regular and Handicap Spaces Required			198	7	309
					407
					Y or N
					Y or N

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Proposed restaurant with full alcohol

- A ALL EGRESS DOORS SHALL BE OPERABLE FROM THE INSIDE WITHOUT THE USE OF A KEY OR SPECIAL KNOWLEDGE.
- B THE MAXIMUM EFFORT TO OPERATE DOORS SHALL NOT EXCEED 8.5 POUNDS FOR INTERIOR DOORS AND 30 POUNDS FOR EXTERIOR DOORS.
- C THE DOOR SHALL BE OPERABLE BY A SMOOTH UNTEXTURED SURFACE THAT ALLOWS THE DOOR TO BE OPENED BY A WHEELCHAIR FOOTREST WITHOUT CREATING A TRAP OR HAZARDOUS CONDITION.

NUMBER OF OCCUPANTS EXITING A ROOM

NUMBER OF OCCUPANTS EXITING AN AREA

OCCUPANT CALCULATION TAG
PER PERSONAL ROOM
MAXIMUM FLOOR AREA
ALLOWANCES PER OCCUPANT

FIRE EXTINGUISHER CANNOT

PANIC HARDWARE

1-HOUR RATED WALL TO REMAIN

2-HOUR RATED WALL TO REMAIN

F.E.C.

P.A.

INCHES	
MIN.	MAX.
32	48
32	48
32	48

OCCUPANCY CALCULATIONS

ROOM NAME	AREA	FACTOR	OCCUPANCY
VERANDA	220 SF	15	16
MAIN DINING	1434 SF	15	96
EXTERIOR DINING	1696 SF	15	117
KITCHEN	1231 SF	200	7
WOMEN RESTROOM	142 SF		
MEN RESTROOM	143 SF		
	443 SF		178

PLUMBING AND FIXTURE COUNT

TOTAL OCCUPANCY LOAD: 226
MALE: 113
FEMALE: 113
OCCUPANCY A-2

WATER CLOSET: 1 PER 75
FEMALE: 2 REQUIRED; 2 WATER CLOSET * 1 URINAL PROVIDED
FEMALE: 2 REQUIRED; 3 WATER CLOSET PROVIDED

LAVATOIRES: 1 PER 200
MALE: 1 REQUIRED; 2 PROVIDED
FEMALE: 1 REQUIRED; 2 PROVIDED
TOILETTE: 1 PROVIDED

25-0
01/13

