



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) Variance

Project Address (Location) 815 Clarkway Dr, Las Vegas Nevada 89106

Project Name Maricela Palacios Solar Canopy **Proposed Use** Shade structure with Solar install

Assessor's Parcel #(s) 13928301015 **Ward #** 5

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

Additional Information Solar Canopy project at the above address

Property Owner Maricela Palacios **Contact** Moises Murillo

Address 815 Clarkway Dr **City** Las Vegas **State** NV **Zip** 89106

E-mail murillo_moises@yahoo.com **Phone** 702-533-7430

Applicant Icon Power **Contact** Jonathan Malfabon

Address 3006 S Priest Dr **City** Tempe **State** AZ **Zip** 852821

E-mail jonathan.malfabon@iconpower.com **Phone** 520-800-9266

Representative Jonathan Malfabon **Contact** same as above

Address same as above **City** same as above **State** same **Zip** same

E-mail same as above **Phone** same as above

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]

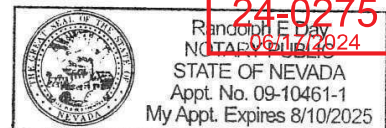
An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps and Parcel Maps

Print Name Maricela Palacios

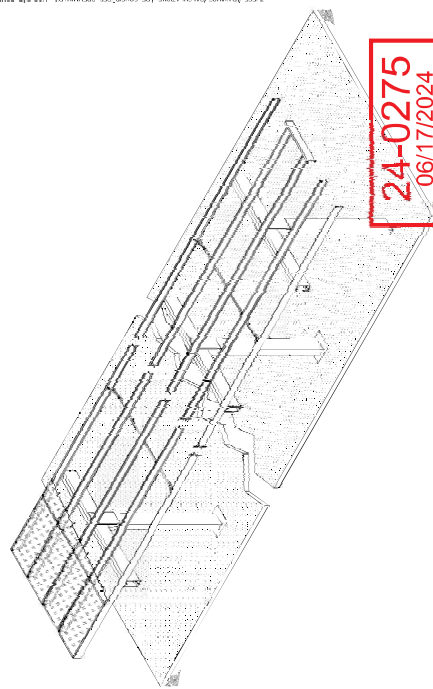
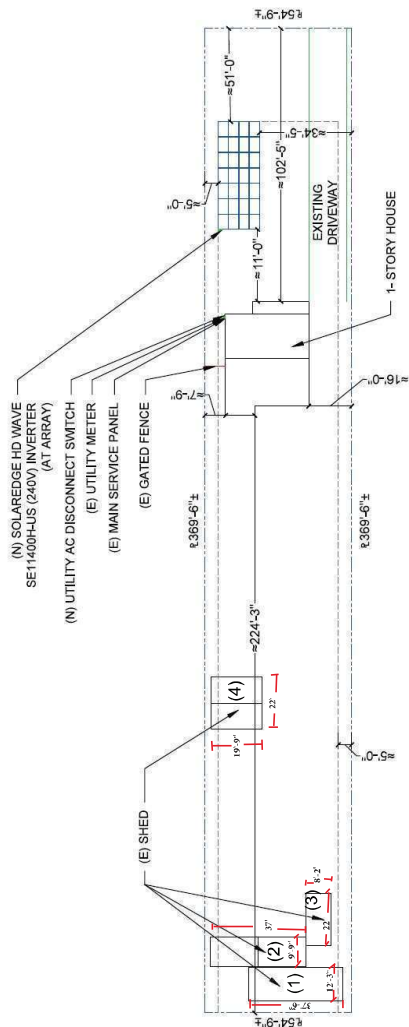
Subscribed and sworn before me

This 5th day of June, 2024

Notary Public in and for said County and State



CLARKWAY DR.



24-0275
06/17/2024

REPRESENTATIVE SEMI-CANTILEVERED SOLAR CANOPY ISOMETRIC

PERMITATIVE SEMI-PARTIALLY COVERED SOAKAWAY ISOLATION



24-0275
06/17/2024