



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) Special Use Permit

Project Address (Location) 4632 West Sahara Ave., Las Vegas, Nevada 89102

Project Name Avis Auto Rental **Proposed Use** Auto Rental

Assessor's Parcel #(s) 162-06-402-001 **Ward #** Brian Knudson

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

Additional Information Avis has been operating at this Shopping Center since 1996. Moved location at the request of ownership

Property Owner Sahara 3D LLC, a Nevada limited liability company **Contact** _____

Address 468 N. Camden Drive, Suite 300 **City** Beverly Hills **State** CA **Zip** 90210

E-mail ginger@orbiscre.com **Phone** 310-276-1290

Applicant Avis Budget Group **Contact** Don Pierce

Address 1611 W. Vista Way **City** Vista **State** CA **Zip** 92083

E-mail Don.Pierce@avisbudget.com **Phone** 650-270-4069

Representative _____ **Contact** _____

Address _____ **City** _____ **State** _____ **Zip** _____

E-mail _____ **Phone** _____

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

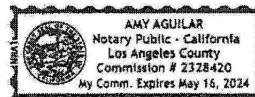
Print Name JOSEPH DANESHKAN

Subscribed and sworn before me

This 18th day of April, 2024

AMY AGUILAR amy aguilav

Notary Public in and for said County and State



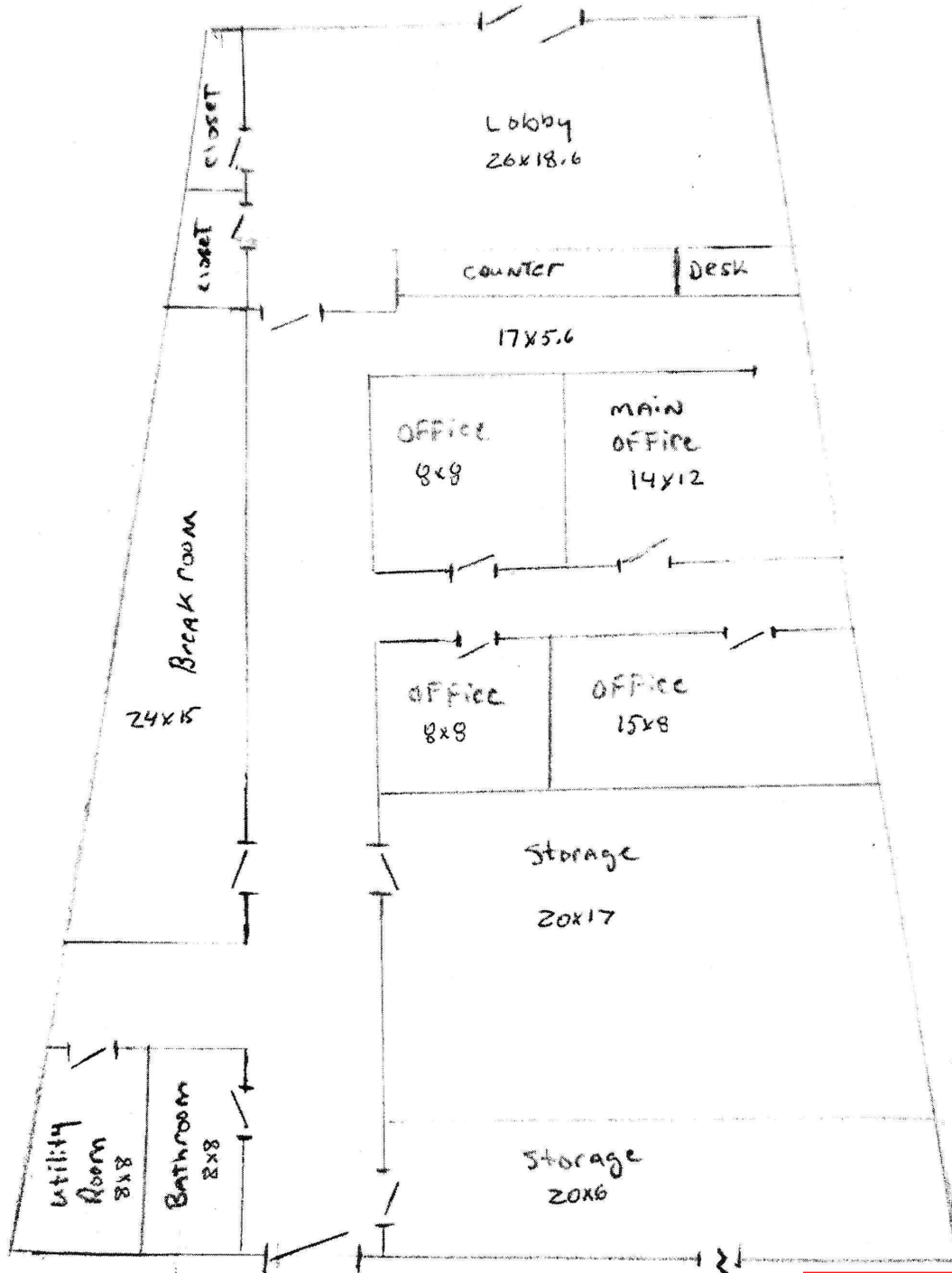
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4632 W Sahara
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2700 SQ FT OFFICE



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