



# 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) 300 S. BRUCE ST, LAS VEGAS, NV, 89101

**Project Name** RAJAT MINI MART AND CIGARETTES **Proposed Use** BEER/WINE OFF SALE

**Assessor's Parcel #(s)** 13935413112 **Ward #** 3

**General Plan:** Existing SC Proposed SC **Zoning:** Existing C-1 Proposed ---

**Additional Information** BUSINESS IS EXISTING RETAIL STORE WITH TOBACCO LICENSE AND RE-SALE PERMIT

**Property Owner** NICOLAS P. DIPIETRO **Contact** \_\_\_\_\_

**Address** 1800 PENINSULA PLACE **City** COSTA MESA **State** CA **Zip** 92627

**E-mail** NICKDORO@ATT.NET **Phone** 949-467-9386

**Applicant** BALDEV KRISHAN KUMRA **Contact** 702-332-9418

**Address** 5970 CLOVER CANYON LN **City** LAS VEGAS **State** NV **Zip** 89142

**E-mail** \_\_\_\_\_ **Phone** \_\_\_\_\_

**Representative** RAHUL SODHI **Contact** \_\_\_\_\_

**Address** 41485 S. BUFFALO DR **City** LAS VEGAS **State** NV **Zip** 89147

**E-mail** RAHUL@KAIZEN.NV.COM **Phone** 702-820-6723

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** RAHUL SODHI

Subscribed and sworn before me

This \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_

Notary Public in and for said County and State

50 Lewis Ave

13935499004

13935499006

64.5

49.41

13935413113

13935413112

120

105.04

14

13

13935899042

64.41

13935499035

20

64.5

39.91

13935413169

307.22

20-0201  
09/16/2020

S Bruce St

