



# 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) 4433 SUNRISE AVE

Project Name SHED

Proposed Use HOBBIES

Assessor's Parcel #(s) 14032310192

Ward # 3-DIAZ

General Plan: Existing \_\_\_\_\_ Proposed \_\_\_\_\_ Zoning: Existing \_\_\_\_\_ Proposed \_\_\_\_\_

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

Property Owner FREDERICK DEAN GOMPF JR

Contact FRED GOMPF

Address 4433 SUNRISE AVE

City LAS VEGAS State NV Zip 89110

E-mail NASCARFREDDEAN@YAHOO.COM

Phone 619-985-6866

Applicant FREDERICK DEAN GOMPF JR

Contact FRED GOMPF

Address 4433 SUNRISE AVE

City LAS VEGAS State NV Zip 89110

E-mail NASCARFREDDEAN@YAHOO.COM

Phone 619-985-6866

Representative FREDERICK DEAN GOMPF JR

Contact FRED GOMPF

Address 4433 SUNRISE AVE

City LAS VEGAS State NV Zip 89110

E-mail NASCARFREDDEAN@YAHOO.COM

Phone 619-985-6866

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

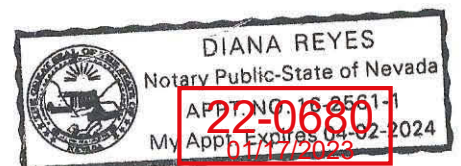
An authorized agent may sign in lieu of the property owner for Final Maps, Tentative Maps and Parcel Maps

Print Name FREDERICK DEAN GOMPF

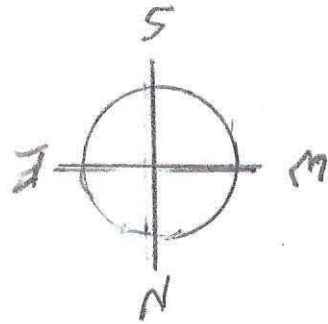
State of Nevada  
County of Clark  
Subscribed and sworn before me

This 17 day of January, 20 23  
by Frederick Dean Gompf

Notary Public in and for said County and State



DRIVEWAY



18'

44'

19'6"

2'6"

27'

8'

20'

HOUSE



8'

27'

9'

47'

9'

28'

99'

There is no interior  
access to the house.

20'

BENCH

2'

16'

SHED FLOOR PLAN

8'

22-0680  
01/17/2023

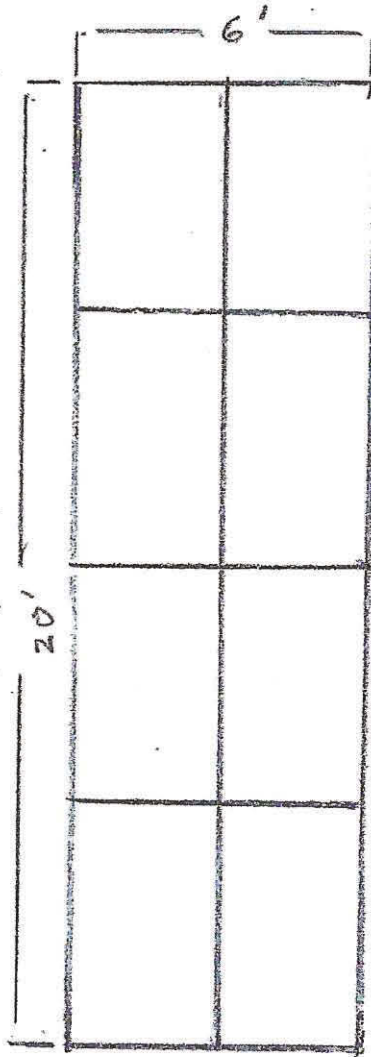
4433 SUNRISE AVE



ROOF

2x4 frame with one end hooked to the fascia and the other to the wall with corrugated tin

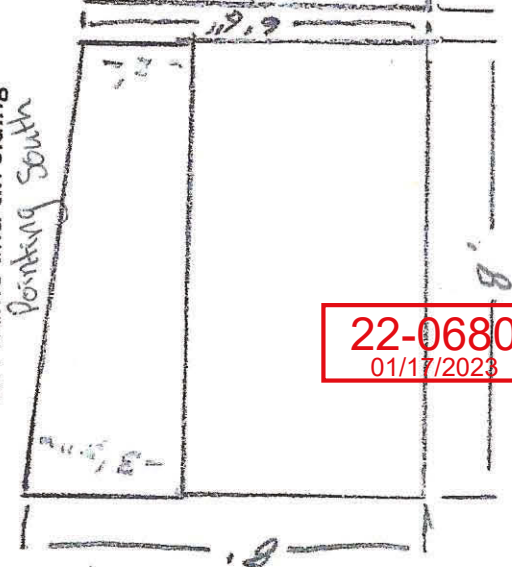
Pointing up



BLOCK FENCE

2x4 frame and tin siding

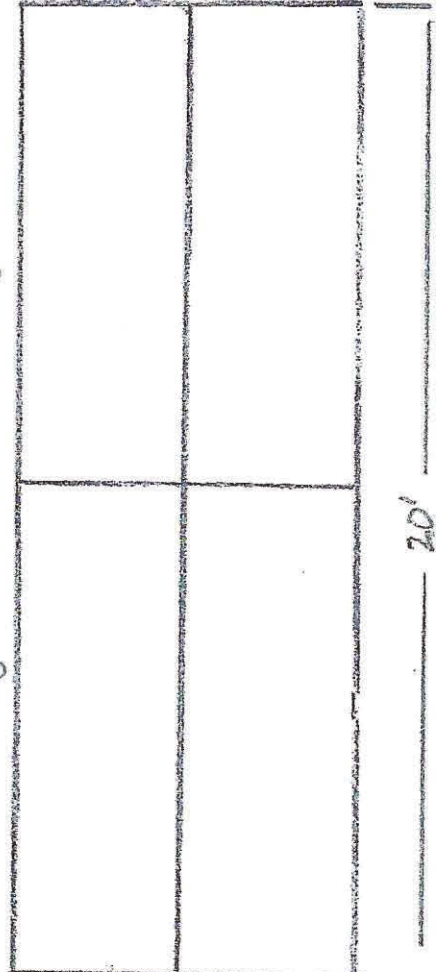
Pointing South



BACK WALL

3 4x4 posts and 3 horizontal 2x4s with corrugated tin siding

pointing west/west property line is feet



WALL AND DOOR

Imitation wood siding

Pointing north

