

CITY OF NEEDLES, CALIFORNIA  
Application For Use Permit

Name of Applicant: 1707 Needles Hwy LLC Phone: 818-381-9900 Applicant must be the owner of the land, the lessee having a lease-hold interest of not less than 5 years, or the agent of any of the foregoing duly authorized in writing)

I, (We) the undersigned, 1707 Needles Hwy LLC (Owner Lessee/Agent) of the property listed below, hereby request that the following stated use be permitted to be constructed and/or operated.

1. Project name and address: 1707 Needles Hwy LLC  
1707 Needles Hwy, Needles CA 92363
2. Legal Description of Parcel (attach if necessary): APN 0185-048-09
3. Briefly Describe: a. Purpose and Intent of proposed project (include acres, square feet, units, etc.).  
CONDITIONAL USE PERMIT (CUP) TO CONVERT THE EXISTING RIVER VALLEY MOTEL INTO 29 MICRO-APARTMENTS AND ONE (1) MANAGER'S OFFICE UNIT LOCATED AT 1707 NEEDLES HWY (APN 0185-048-09) WITHIN THE GENERAL COMMERCIAL (C-2) LAND USE ZONING DESIGNATION.  
  
b. Population projection (project residents): \_\_\_\_\_  
c. Number of persons employed during operation: full time \_\_\_\_\_, part time 1  
d. Will the Project require new utility services? \_\_\_\_\_ yes X no  
i. Water Service X no. If so, estimated peak water demand in gallons/minutes: \_\_\_\_\_ service requirement.  
ii. Sewer Service X no. Any chemical wastes expelled in sewers? \_\_\_\_\_  
If yes, explain: \_\_\_\_\_  
iii. Electric Service: main size 200; single phase X; three phase \_\_\_\_\_  
Attachment to existing electric facilities: load calculations \_\_\_\_\_  
e. Estimated daily vehicular traffic generated by the operation: 3 to 10 Comment: \_\_\_\_\_  
f. List major machines – give horsepower and noise rating in decibels: N/A  
g. Will the project require a permit from the Air Pollution Control District, and if so, describe: N/A  
h. What will be the hours of operation: N/A  
i. Describe materials or machinery that will be stored or parked outside: N/A
4. Attached ☒ Site Plan ☒ Elevations ☒ Filing Fee ☒ Legal ( ); (site plans folded 8 1/2" x 11" reduction)

### AUTHORIZATION

1707 Needles Hwy, Needles, Ca 92363

Names and signatures of all persons having an interest in this property described as \_\_\_\_\_  
(the "Property") whose consent is required (by virtue of such interest) to authorize the filing of this application.

NAME (print or type), Signature & Address

CAPACITY (Check appropriate)

OWNER\*

LESSEE

AGENT

OTHER (Describe)

Armen Ghadimian

X

Signature

Address 1707 Needles Hwy Needles Ca

Signature

Address

OWNER: As Owner of the Property, I \_\_\_\_\_ hereby declare and certify under penalty of perjury under the laws of the State of California that the above-named person(s) is/are duly authorized to act on my behalf with the City of Needles and NPUA and represent my interests in the Property before the Planning Commission and the City Council/NPUA, including but not limited to in connection with the application filed herewith.

Signature of Property owner

Owner name printed

Ghadimian, Armen

### NOTARY

#### OWNER SIGNATURE NOTARIZATION:

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

STATE OF CALIFORNIA )

COUNTY OF SAN BERNARDINO ) SS:

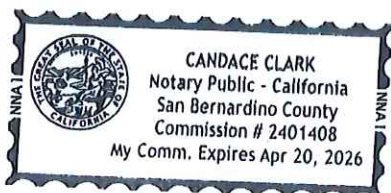
On JANUARY 23, 2025, before me, Candace Clark, a Notary Public, personally appeared Armen Ghadimian, Owner, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

WITNESS my hand and official seal.  
(seal)

Signature, Notary

Candace Clark





BA20240047764



**STATE OF CALIFORNIA**  
*Office of the Secretary of State*  
**STATEMENT OF INFORMATION**  
**LIMITED LIABILITY COMPANY**

California Secretary of State  
1500 11th Street  
Sacramento, California 95814  
(916) 653-3516

For Office Use Only

**-FILED-**

File No.: BA20240047764

Date Filed: 1/8/2024

B2395-4098 01/08/2024 5:36 PM Received by California Secretary of State

Entity Details	
Limited Liability Company Name	1707 NEEDLES HWY, LLC
Entity No.	202460416526
Formed In	CALIFORNIA
Street Address of Principal Office of LLC	
Principal Address	1707 NEEDLES HWY NEEDLES, CA 92363
Mailing Address of LLC	
Mailing Address	1707 NEEDLES HWY NEEDLES, CA 92363
Attention	
Street Address of California Office of LLC	
Street Address of California Office	None
Manager(s) or Member(s)	
Manager or Member Name	Manager or Member Address
+ ARMEN GHADIMIAN	1707 NEEDLES HWY NEEDLES, CA 92363
+ VAHAN OGANESYAN	1707 NEEDLES HWY NEEDLES, CA 92363
Agent for Service of Process	
California Registered Corporate Agent (1505)	IG ACCOUNTANCY, INC Registered Corporate 1505 Agent
Type of Business	
Type of Business	REAL ESTATE
Email Notifications	
Opt-in Email Notifications	No, I do NOT want to receive entity notifications via email. I prefer notifications by USPS mail.
Chief Executive Officer (CEO)	
CEO Name	CEO Address
None Entered	
Labor Judgment	
No Manager or Member, as further defined by California Corporations Code section 17702.09(a)(8), has an outstanding final judgment issued by the Division of Labor Standards Enforcement or a court of law, for which no appeal is pending, for the violation of any wage order or provision of the Labor Code.	

Electronic Signature

☒ By signing, I affirm under penalty of perjury that the information herein is true and correct and that I am authorized by California law to sign.

*ARMEN GHADIMIAN*

Signature

*01/08/2024*

Date