

FOR CITY USE ONLY: Application # _____ Filed on: _____



APPEAL TO THE BOARD OF ADJUSTMENT

PRO	DJECT NAME:				
	LOCATION:				
APPLICANT INFORMATION	Applicant Name				
	Address				
	Phone Number Fax Number				
	E-Mail Address				
	Legal Interest:				
	☐ Property Owner				
로	☐ Owner Under Contract - Date of contract//20 and expiration date//20				
	☐ Lessee				
	Lessee				
¥	Authorized Agent (if different from Applicant)				
REPRESENTATIVE	Address				
SEN	Phone Number Fax Number				
	Email Address				
2					
	The conditional condition that				
	The applicant certifies that: a. They have not made any arrangement to pay any Commission, gratuity or consideration, directly or indirectly, to any official, employee or appointee of the City of Maryland Heights with respect to the approval of this application.				
Z	b. They have legal interest in the described property.				
RMATION	c. All information given herein is true and a statement of fact.				
₹	d. They have read and understand the public notification requirements.				
CERTIFICATION OF INFO	e. Authorization to Visit the Property: Site visits to the property by City representatives are essential to process this application. By signing below, the owner/applicant authorizes City representatives to visit and photograph the property described in this application.				
	Applicant Signature				
	State of Missouri)				
8	County of)				
	Subscribed and sworn to before me this day of in the year 20				
	Notary Public				
	My Commission Expires				
#					

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Owner of Record (if different from Applicant)



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ROJECT NAME:						
Property Owner of Record Address Phone Number E-Mail Address						
Address						
Phone Number						
E-Mail Address						
5						
Property Descripti (address of record						
Property Descripti						
(address of record	or locator number)					
	-					
Ē						
The owner certifie	es that:					
			y or consideration, directly or indirectly, swith respect to the approval of this			
b. All information	on given herein is true and a	statement of fact.				
this applicati	c. Authorization to Visit the Property: Site visits to the property by City representatives are essential to process this application. By signing below, the owner authorizes City representatives to visit and photograph the property described in this application.					
Owner Signature						
State of Missouri)						
County of)				
Subscribed and sw	orn to before me this	day of	in the year 20			
Notary Public						
My Commission Ex	pires					



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PROJECT NAME:						
	PARTIES OF INTEREST IST ALL PARTIES THAT WILL BE REPRESENTING THE APPLICANT ON THE PROJECT					
FO N	Name	Project Role				
% c	Company	Property Manager				
# I	Address	Attorney Site Engineer				
유 	Phone Number	Surveyor Architect				
ا ي		Real Estate Agent				
	Email Address	Planner Developer				
	lama	Project Role				
	Name	Property Manager				
世上	Company	Attorney Site Engineer				
	Address	Surveyor				
<u>۹</u>	Phone Number	Architect Real Estate Agent				
PARTY OF INTEREST	mail Address	Planner				
- _		Developer				
ST	lame	Project Role				
	Company	Property Manager Attorney				
	Address	Site Engineer Surveyor				
PARTY OF INTEREST	Phone Number	Architect				
	Email Address	Real Estate Agent Planner				
盔╚		Developer				
N	lame	Project Role				
PARTY OF INTEREST	Company	Property Manager Attorney				
	Address	Site Engineer				
ᆼ	Phone Number	Surveyor Architect				
	Email Address	Real Estate Agent Planner				
盔╚		Developer				
	Name	<u>Project Role</u>				
PARTY OF INTEREST	Company	Property Manager Attorney				
	Address	Site Engineer				
ᆼ	Phone Number	Surveyor Architect				
<u> </u>	Email Address	Real Estate Agent				
₹ [ˈ		Planner Developer				