

# APPLICATION FORM

FOR CITY USE ONLY:

Application # \_\_\_\_\_

Filed on: \_\_\_\_\_



APPEAL TO THE BOARD OF ADJUSTMENT

PROJECT NAME: \_\_\_\_\_

LOCATION: \_\_\_\_\_

APPLICANT INFORMATION

Applicant Name	_____		
Address	_____		
Phone Number	_____	Fax Number	_____
E-Mail Address	_____		
Legal Interest:	_____		
<input type="checkbox"/> Property Owner	_____		
<input type="checkbox"/> Owner Under Contract - Date of contract ___/___/20___ and expiration date ___/___/20___	_____		
<input type="checkbox"/> Lessee	_____		

REPRESENTATIVE

Authorized Agent (if different from Applicant)	_____		
Address	_____		
Phone Number	_____	Fax Number	_____
Email Address	_____		

CERTIFICATION OF INFORMATION

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.
- b. They have legal interest in the described property.
- c. All information given herein is true and a statement of fact.
- d. They have read and understand the public notification requirements.
- 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) \_\_\_\_\_

County of \_\_\_\_\_)

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_\_\_.

Notary Public \_\_\_\_\_

My Commission Expires \_\_\_\_\_

OWNER

Owner of Record (if different from Applicant)	_____
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OWNER INFORMATION

Property Owner  
of Record \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Fax Number \_\_\_\_\_

E-Mail Address \_\_\_\_\_

PROPERTY INFORMATION

Property Description

(address of record or locator number) \_\_\_\_\_

CERTIFICATION OF INFORMATION

The owner 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.
- b. All information given herein is true and a statement of fact.
- 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 sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_ in the year 20\_\_\_\_.

Notary Public \_\_\_\_\_

My Commission Expires \_\_\_\_\_



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**PARTIES OF INTEREST**

LIST ALL PARTIES THAT WILL BE REPRESENTING THE APPLICANT ON THE PROJECT

**PARTY OF INTEREST**

Name \_\_\_\_\_

Company \_\_\_\_\_

Address \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Project Role

- Property Manager
- Attorney
- Site Engineer
- Surveyor
- Architect
- Real Estate Agent
- Planner
- Developer

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Company \_\_\_\_\_

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