



SPECIAL USE EXCEPTION PETITION

CITY OF BALLWIN } FEE: with site plan review \$ 1,500.00
} without site plan review \$ 750.00
COUNTY OF ST. LOUIS } PAID:
STATE OF MISSOURI } NUMBER:

TO THE BOARD OF ALDERMEN
CITY OF BALLWIN

Type of Special Use Exception:

Code Section under which petition is being filed:

Now comes (print name of Petitioner)
and states to the Board of Aldermen:

- I. That he, she, it, they, has (have) the following legal interest in the tract of land and/or premises located within the corporate limits of Ballwin, Missouri, described in Section II of this petition.
A. State Legal Interest:
B. Documentation of Legal Interest must accompany this petition.
II. That the legal description of the property/premises, for which a Special Use Exception is desired, is enclosed.
III. That a survey or drawing of the property/premises, for which a Special Use Exception is requested, is enclosed, and said drawing is to a scale of 100 feet or less to the inch.
IV. That the street address of said property is:
V. That the area (acres or square feet) of said property is:
VI. That the zoning classification of said property is:
VII. That the present use of said property is:
VIII. That the intended use of said property is:
IX. That the proposed Special Use Exception does not violate any private deed restrictions on said property.
X. That all information provided herein is true and a statement of fact.

I, the Petitioner, do hereby request an Ordinance of the Board of Aldermen approving and granting the herein described Special Use Exception.

PETITIONER: \_\_\_\_\_

AUTHORIZED SIGNATURE: \_\_\_\_\_

AUTHORIZED SIGNATURE (*PRINTED*): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

I, (*print name of Petitioner*) \_\_\_\_\_, do hereby designate \_\_\_\_\_ as my agent for purposes of presenting this petition, negotiating with the City of Ballwin on all issues relative to this petition, and corresponding and communicating with representatives of the City of Ballwin relative to this petition.

AGENT'S SIGNATURE: \_\_\_\_\_

AGENT'S NAME (*PRINTED*): \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE/ZIP: \_\_\_\_\_

TELEPHONE NO. \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

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

My Commission Expires

\_\_\_\_\_