



SPECIAL USE EXCEPTION TRANSFER PETITION

CITY OF BALLWIN } FEE: \$250.00
COUNTY OF ST. LOUIS } PAID:
STATE OF MISSOURI } NUMBER:

TO THE BOARD OF ALDERMEN
CITY OF BALLWIN

Type of Special Use Exception:

Original Special Use Exception Ordinance Number:

Date of original Ordinance:

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 the street address of said property is:

IV. That the area (acres or square feet) of said property is:

V. That the zoning classification of said property is:

VI. That the present use of said property is:

VII. That the intended use of said property is:

VIII. That he, she, it, they has (have) obtained permission from the holder of the Special Use Exception to request its transfer into the name of the petitioner, and that the holder of the Special Use Exception waives all claim or rights upon transfer.

WHEREFORE, the holder(s) of a special Use Exception, granted according to Ordinance(s) No., do hereby relinquish all rights and claim to said Special Use Exception(s).

HOLDER: _____

AUTHORIZED SIGNATURE: _____

AUTHORIZED SIGNATURE (*PRINTED*): _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE NO. _____

Subscribed and sworn before me this _____ day of _____, _____.

Notary Public

My Commission Expires

WHEREFORE, Petitioner(s) pray(s) that a Special Use Exception, granted according to the provisions of Ordinance(s) _____ be transferred to the Petitioner.

PETITIONER: _____

AUTHORIZED SIGNATURE: _____

AUTHORIZED SIGNATURE (*PRINTED*): _____

ADDRESS: _____

CITY/STATE/ZIP: _____

TELEPHONE NO. _____

Subscribed and sworn before me this _____ day of _____, _____.

Notary Public

My Commission Expires
