



APPEAL FORM

City of Aurora, MO
Board of Zoning Adjustment
2 W Pleasant Street
Aurora, MO 65605

Address Involving Appeal: 909 S. Hudson Fee \$ 100

Submittal Information and Procedures:

The applicant will submit to the Community Development Department staff the application form and all necessary documentation prior to the Board of Adjustment hearing date.

Supplementary information is considered a required part of the application. Applications will not be considered accepted for review unless all required information is provided.

A fee in accordance with the city's adopted fee schedule must accompany the application.

The applicant is expected to attend the hearing to present evidence and answer questions from the Board. The applicant must be prepared to be cross examined concerning evidence or testimony provided. The absence of the applicant is grounds to warrant deferral of action by the Board of Adjustment.

General

Appeals to the Board may be taken by any person aggrieved, by any neighborhood organization as defined in § 32.105, RSMo., representing such person, or by any officer, department, board or bureau of the City affected by any decision of the Planning and Zoning Commission or Administrative Officer. Such appeal shall be taken within a reasonable time as provided by the rules of the Board by filing with the Planning and Zoning Commission or Administrative Officer from whom the appeal is taken, and with the Board a notice of the appeal specifying the grounds thereof. The Planning and Zoning Commission or Administrative Officer thereof, from whom the appeal was taken, shall forthwith transmit to the Board all the papers constituting the records upon which the action appealed from was taken. Service of such notices, papers, and records shall be constituted by depositing the same with the City Clerk.

An appeal stays all proceedings in furtherance of the action appealed from unless the officer from whom the appeal is taken certifies to the Board, after the notice of appeal shall have been filed with him/her, that by reason of facts stated in the certificate a stay would, in his/her opinion, cause imminent peril to life or property. In such case, proceedings shall not be stayed otherwise than by a restraining order which may be granted by the Board or by a court of record on application or notice to the officer from whom the appeal is taken and on due cause shown.

The Board may reverse, affirm or modify any decision made by an Administrative Officer of the City.



Section A: Applicant Information

Name: Heman Houses, LLC

Mailing Address: 2733 E. Battlefield Rd #259
Springfield, MO 65804

Phone Number: 417-812-5672

Email: Brett@HemanHouses.com

Property Owner Information (if different from the applicant):

Name(s): Brett Heman

Address: 2733 E. Battlefield Rd #259
Springfield, MO 65804

Phone Number: 417-812-5672

Email: Brett@HemanHouses.com

Section B: Property Information

Address of site: 909 S. Hudson Aurora, MO 65605

Property Identification Number: ~~18250~~ South 1/2 of Lot 2 and all of Lot 3 of Block 7, south park addition

Lot/Block/Section: _____

Zoning District: R-2

Required setbacks: Front: 25 Side: 10 Rear: 30' @ 30% of or depth

Total Site Area: 182.5 x 61.5 = 11,223.75



Flood Zone: No

Section C: Hearing Type (Please Check One)

- Variance
- Appeal

Reason for appeal or variance request:

Front yard to 15'

Rear yard to 18'

Structures to face north and south

rather than East to West.

Section D: Certification

In filing this application to the Board of Adjustment, I hereby certify that all of the information presented in the application is accurate to the best of my knowledge, information, and belief.

[Signature]
Signature of Applicant(s)

12-17-2024
Date

I have received, read, and fully understand Section 400.480 Appeals, of the City of Aurora Municipal Code of Ordinances as it pertains to my application. I have also read and understood the application to the Board of Adjustment. The items I did not understand, if any, have been explained to my satisfaction by an employee of the City of Aurora Community Development Department.

I understand the Board of Adjustment, being quasi-judicial in nature, will receive only competent evidence concerning my application. I understand that I have the right to cross-examine witnesses presented and that I may be cross examined on matters pertaining to the evidence and testimony that I present. I further understand that I have the right to have an agent or legal counsel present to represent me.

[Signature]
Signature of Applicant(s)

12-17-24
Date

Signature of Applicant (if jointly applying)



Appointment of Authorized Agent

I, Brett Heman, the owner of the property subject to the Application to the City of Aurora Board of Adjustment, do hereby appoint, as my authorized agent regarding this application, to provide testimony and evidence and respond to testimony and evidence on my behalf and to represent me regarding this application. If chosen to have a third party representation at the evidentiary hearing, representation must be a registered attorney.

Brett Heman
Property Owner Signature

12-17-24
Date

Authorized Agent Signature

Date

Rec'd
12/17/24
CB

CITY OF AURORA
2 W PLEASANT
PO BOX 30
AURORA

MO 65605

Description	Amount
BRETT HEMAN BOA BBDA 909 S HUDSON VARIANCE MEETING	100.00
CC Received Change	100.00 .00

PLH 12/17/24 12:47 Rcpt# 40983