

City of Aurora Planning & Zoning Department Application

PROJECT TYPE AND TITLE (Check ONE)

New Subdivision, Annexation, Zoning and Concept Plan (Requires Preliminary Plat).

Title on Plans: _____

Rezoning and Concept Plan

Zoning Code Amendment

Minor Subdivision

Vacation of Easement

Vacation of Right of Way

Special Use Permit

Other: _____

Fees Table (See ORD 500.030 for complete list of fees)

Plan review (commercial)	\$100.00 plus \$50.00 per hour
Plan review (residential)	\$25.00
Plat review fees	\$150.00 plus \$10.00 per lot
Minor subdivision	\$50.00
Annexation/Zoning fees	\$100.00 fee (per application)
Special use permit fee	\$100.00 fee (per application)
Board of Adjustment	\$100.00 fee (per application)
Building Board of Appeals	\$100.00 fee (per appeal)

Corresponding amount paid to the City of Aurora listed in fee table must accompany application for processing by check or money order, debit or credit payment arrangements also can be made by calling the City Collector at (417)-678-5121

APPLICANT INFORMATION

Date: 12-17-2020

Applicant Name: Wesley Busch

Address: 103 Elm St Washington MO, 63090

Phone: (636)231-4317 Email: wbusch@bfaeng.com

Relationship to Owner: Owner Consultant

Description of Project: Minor Subdivision of a single tract into two individual lots

PROPERTY OWNER(S)

Name	Address	Phone	Email
<u>CB Development II, LLC</u>	<u>PO Box 39 Belle MO 65013</u>	<u>573-859-6998</u>	<u>Kevin@AmericanRealtyMO.com</u>

Mortgagees/Consultants

Wesley Busch BFA

Contact Person

Identify one person to serve as the contact for the Planning and Zoning Department during the review process. This will be the only person notified by the Planning and Zoning Department of meeting schedules. It will be his/her responsibility to notify the other parties, who may be involved in the project.

Name	Address	Phone	Email
<u>Wesley Busch</u>	<u>103 Elm Street, Washington, MO 63090</u>	<u>636-231-4317</u>	<u>wbusch@bfaeng.com</u>

2 W. PLEASANT • P.O. BOX 30 • AURORA, MO 65605

PHONE: 417-678-5121 • FAX: 417-678-6599

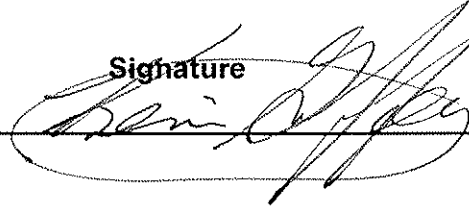
Owners Certification

I certify that I am the person in interest and the information, exhibits herewith are true and correct to the best of my knowledge, and that in filing this application, I am acting with the knowledge and consent of all persons in interest. Without the consent of persons with interest, this requested action cannot lawfully be accomplished.

Name

Kevin Guffey

Signature



For Office Use Only:

Approved

Denied _____

Signature: _____ Date: _____

City official

Forward to P&Z Commission -- Meeting Date set for _____, 2016 at Time 6:30pm.