



3939 S. Lindbergh Blvd.
314-849-3400

FILE NO. P-02-24
DATE 3-11-2024
FEE _____

TEXT AMENDMENT (UDO)

- 1. Applicant's Name City of Sunset Hills
- 2. Mailing Address 3939 S. Lindbergh Phone 314-849-3400
- 3. Agent's Name and Address _____
(If different than Applicant)
- 4. Property Owner's Name City of Sunset Hills
- 5. Address of Property _____
- 6. Area of Property City wide
- 7. Existing Zoning _____ Proposed Zoning _____
- 8. Proposed Use _____
- 9. Remarks and Reasons Update and amend Sections 1 & 3 of
the City of Sunset Hills UDO

I hereby state that I have read all applicable sections of the Zoning Ordinances of the City of Sunset Hills and can comply with all requirements of those regulations. I also certify that all statements made on this application are true and that I have a legal right to make this application.

Signature: 