



3939 S. Lindbergh Blvd.  
314-849-3400

FILE NO. P-03-24  
DATE 3-21-2024  
FEE \_\_\_\_\_

**TEXT AMENDMENT (UDO)**

- 1. Applicant's Name City of Sunset Hills
- 2. Mailing Address 3939 S. Lindbergh Phone \_\_\_\_\_
- 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 Section 4 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: 