



DEPARTMENT OF PLANNING & DEVELOPMENT
10 North Bemiston Avenue, Clayton, MO 63105

APPLICATION FOR CONDOMINIUM

(Please type

or print)

- **ALL SECTIONS OF APPLICATION MUST BE COMPLETE**
- **SUBMIT TWELVE COPIES* OF PLAT (FOLDED PRINT SIDE OUT, PLEASE) & DECLARATION/BI-LAWS WITH THIS APPLICATION**
- **\$335.00 APPLICATION FEE MUST ACCOMPANY THIS APPLICATION (includes \$35.00 non-refundable processing fee)**

Name of Condominium: _____ Address of Condominium: _____

Existing Building: _____ New Building: _____

Legal Description: Lot _____ Block _____ Subdivision _____

Applicant's Name (please print) & Complete Address: _____

Applicant's Phone No. () _____

Property Owner's Name, Address & Phone No. (if other than above) _____

Zoning District: _____ Lot Size: _____

Number of Buildings: _____ Number of Units/Building: _____

Number of Existing/Proposed Units: _____ Unit Sizes (in Square Feet): _____

Number of Units After Renovation, if applicable: _____ Unit Sizes (in Square Feet): _____

Has Inspection Approval Been Obtained? _____ Date of Approval: _____

It is hereby requested that approval of the above condominium plat be considered by the Honorable Mayor and Members of the Board of Aldermen after completion of administrative review. A representative will appear at specified Board of Aldermen meeting to answer any questions.

Respectfully Submitted on _____ (DATE)

Applicant's Signature