

Board of Variance Appeal Application Form

OFFICE OF THE CITY CLERK

Burnaby City Hall, 4949 Canada Way, Burnaby BC, V5G 1M2, Phone: 604-294-7290 Email: clerks@burnaby.ca

Applicant
Name of Applicant AMITOJ SANGHERA
Mailing Address <u>5846 - 124A</u> 5T
City/Town SURREY Postal Code V3X IX 3
Phone Number(s) (H) 604-825-1639 (C) 604-825-1639
Email Plas Email Convents to: amitoj Sanghera Ognail. com
Preferred method of contact: ★email ★phone □ mail
Property
Name of Owner AMTOJ SANGHERA
Civic Address of Property 6585 HALIFAX ST
Civic Address of Property
I hereby declare that the information submitted in support of this application is, to the best of my knowledge, true and correct in all aspects, and further that my plans have no conflict with municipal bylaws other than those applied for with in this application. April / 14 / 2015 Applicant Signature
Office Use Only
Appeal Date Appeal Number BV#
Required Documents:
☐ Hardship Letter from Applicant APR 1 4 2015
□ Site Plan of Subject Property □ Building Department Referral Letter □ CLERK'S OFFICE