



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 BIAGIO GARGIULO
Mailing Address 6497 PARKCREST DR
City/Town BURNABY Postal Code BC V5B 2T1
Phone Number(s) (H) 604 294 4714 (C) 778 985 6425
Email ^{Email Ping} ginogargiulo@hotmail.com
^{Comments:}
Preferred method of contact: ☒ email ☐ phone ☐ mail

Property

Name of Owner ANNETTE + BIAGIO GARGIULO
Civic Address of Property 6497 PARKCREST DR
BURNABY, BC V5B 2T1

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.

MAY 11, 2015
Date

[Signature]
Applicant Signature

Office Use Only

Appeal Date 2015 June 04 Appeal Number BV# 6165

Required Documents:

- ☐ Hardship Letter from Applicant
- ☐ Site Plan of Subject Property
- ☐ Building Department Referral Letter

