

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 HITESH NEB |
| Mailing Address 1625 WEST 5t AVE |
| City/Town VANCOUVER B.G Postal Code V6J IN5 |
| Phone Number(s) (H) 778.668.3043 (C) 778.388.0129 |
| Email hitesh @ regarderign.ca |
| Preferred method of contact: we email we phone a mail |
| . Property |
| Name of Owner |
| Civic Address of Property 4679 APHA DRNE |
| BURNABY, B.C |
| 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. |
| JUNE 14th 2016 |
| Date Applicant Signature |
| Office Use Only |
| Appeal Date Appeal Number BV# |
| Required Documents: |
| ☐ Hardship Letter from Applicant ☐ Site Plan of Subject Property |
| ☐ Building Department Referral Letter |
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Any documents submitted in support of this Board of Variance Appeal will be made available to the Public