



# City of Pleasant Hill

203 Paul Street, Pleasant Hill, MO 64080 816-540-3135 / Fax: 816-987-5141

## **CERTIFICATE OF LEGAL NONCONFORMANCE FOR LAND USE**

**Please complete this form in full, if additional space is required to answer any question, use additional sheets of paper. Securely attach any additional sheets to this application form.**

**If your personal knowledge is insufficient to complete this form, additional application must be submitted by a second party supplementing this application. Both applications shall be submitted together as one document.**

**After completion of this form, the applicant must sign the form and have that signature notarized. (This is applicable to any additional applications submitted as part of the whole.)**

**The application, signed and notarized (with all attachments) is to be returned to:**

**Community Development Division, 203 Paul St. Pleasant Hill, MO. 64080**

**1. Applicant:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

**2. a. Address (or location) of property in question:**

\_\_\_\_\_

**b. Legal Description of property:**

\_\_\_\_\_

\_\_\_\_\_

**c. Size of lot or tract:** \_\_\_\_\_

d. Owner(s) of record: \_\_\_\_\_

---

e. Length of time of ownership: \_\_\_\_\_

3. Present zoning district classification: \_\_\_\_\_

4. a. Use of land \_\_\_\_\_

b. Date use commenced: \_\_\_\_\_

c. Extent of land coverage by use: \_\_\_\_\_

d. Has the use changed? \_\_\_\_\_

e. If so, when? \_\_\_\_\_

f. To what use was it changed? \_\_\_\_\_

g. Has the use been continuous? \_\_\_\_\_

5. Zoning district classification at time use commenced: \_\_\_\_\_

6. a. Did the use of land ever conform to the zoning district classification?  
\_\_\_Yes \_\_\_No

b. When? \_\_\_\_\_

c. For how long? \_\_\_\_\_

7. If your request for a Certificate of Legal Nonconformance is based on recent rezoning of the property, state the zoning district classification in effect prior to the rezoning and whether your property was then in conformance with the zoning district classification.

---

---

**Applicant:**

Name:

\_\_\_\_\_  
**Signature** **Date**

**Owner(s) of record:**

Name:

\_\_\_\_\_  
**Signature** **Date**

Name:

\_\_\_\_\_  
**Signature** **Date**

**STATE OF MISSOURI )**  
**COUNTY OF \_\_\_\_\_)**

I, \_\_\_\_\_, being duly sworn, on oath state that \_\_\_\_\_ is the owner of property at \_\_\_\_\_; that I have personal knowledge as to the use of the property; and that the information set forth in the Application for Certificate of Legal Nonconformance which is attached hereto and incorporated herein is true and correct to my best knowledge.

\_\_\_\_\_  
**Signature**

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_.

Commission Expires: \_\_\_\_\_

Notary

SEAL