




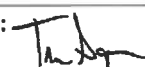
# City of Flagstaff

# Community Development Division

211 W. Aspen Ave  
Flagstaff, AZ 86001  
[www.flagstaff.az.gov](http://www.flagstaff.az.gov)

P: (928) 213-2613  
F: (928) 213-2609

<b>Date Received</b> 3-3-25		<b>Application for a Variance</b>		<b>File Number</b> PZ-25-00052
<b>Note: A pre-application meeting with a staff person is required prior to the submittal of a variance request.</b>				
<b>Property Owner(s)</b> Shawn and Maegan Family Trust	<b>Title</b>	<b>Phone</b> 602-703-2263	<b>Email</b> shawn.burgueno@fairwaymc.com	
<b>Mailing Address</b> 423 E Zuni Dr			<b>City, State, Zip</b> Flagstaff, AZ 86001	
<b>Applicant</b> Trevor Soper	<b>Title</b> Architect	<b>Phone</b> 928-890-7422	<b>Email</b> trs.architect@gmail.com	
<b>Mailing Address</b> 111 E. Aspen Ave. #15			<b>City, State, Zip</b> Flagstaff, AZ 86001	
<b>Property Interest of Applicant(s)</b> (Owner, contractual interest, or agent)				
<b>Site Address</b> 720 N. Apollo Way			<b>City, State, Zip</b> Flagstaff, AZ 86001	
<b>Parcel Number(s)</b> 101-33-009		<b>Zoning District</b> R1- Single Family Residential		
<b>Present Use</b> Residential				
<b>Date of previous application (if any):</b>				

<b>Type of Variance:</b>	<input checked="" type="checkbox"/> Residential	<input type="checkbox"/> Non-Residential	<input type="checkbox"/> Nonprofit
<b>Fees:</b> Applicant shall submit the required variance fee as established in Appendix 2 (Planning Fee Schedule) of the Zoning Code. <b>Fees are non-refundable</b> unless determined by the City to have been collected in error.			
<b>Note: Applications which are incomplete or not accompanied by the required information will not be accepted.</b>			
<b>Property Owner Signature *</b> 	<b>Date:</b> 2-7-25	<b>Applicant Signature *</b> 	<b>Date:</b> 2/6/2025

\* The application shall be signed by the applicant and the current property owner of record. If the property owner is unavailable to sign the application, or the property owner is a corporation or partnership, a Letter of Authorization signed by the property owner or authorized managing agent allowing the applicant to submit the application and act on their behalf must be submitted with the application.

For City Use	
<b>Date Filed:</b> _____	<b>File #:</b> _____
<b>Hearing Date:</b> _____	<b>Publication and Posting Date:</b> _____
<b>Fee Receipt #:</b> _____	<b>Amount:</b> _____ <b>Date:</b> _____
<b>Action by Board:</b>	<b>Cross Reference Numbers:</b>
<b>Hearing Date:</b>	<b>IDS:</b> _____
<input type="checkbox"/> Approved _____	<b>P&amp;Z:</b> _____
<input type="checkbox"/> Approved with Conditions _____	
<input type="checkbox"/> Denied _____	
<input type="checkbox"/> Continued _____	

See reverse side for additional information