

NON-PUBLIC HEARING VARIANCE AFFIDAVIT FOR THE SUBJECT PROPERTY OWNER(S): PART 2

Date: _____

We have seen a drawing of the proposed (e.g. garage, addition) privacy fence to be constructed at (address) 500 Briar Hill Road, Louisville KY 40206

As owners of the property adjacent to the above address, we give our consent and do not object to the planned construction or to the variance that will be required.

Note: If the property is in joint ownership, all owners must sign, or an authorized person must sign (authorized persons must also complete the certification statement). If there is a POA, the property owner is deceased or there are extenuating circumstances, please indicate on the signature line. For additional signatures, use additional copies of the affidavit form.

1. Address: 502 Briar Hill Rd
Owner Name: Cassius M. Moter Signature: Cassius M. Moter
Owner Name: Polly Moter Signature: Polly Moter
2. Address: 501 Briar Hill Rd.
Owner Name: Jaime Alegnani Signature: Jaime Alegnani
Owner Name: John Alegnani Signature: John Alegnani
3. Address: 3110 Lexington Road
Owner Name: Kristen Lutes Signature: Kristen Lutes *unable to obtain signature secondary to no available party present*
Owner Name: _____ Signature: _____
4. Address: 3115 Lexington Road
Owner Name: _____ Signature: _____ *unable to obtain signature secondary to no available party present*
Owner Name: _____ Signature: _____

Certification Statement

A certification statement must be submitted with any application in which the owner(s) of the subject property is (are) a limited liability company, corporation, partnership, association, trustee, etc., or if someone other than the owner(s) of record sign(s) the application.

I, Kristen Lutes, in my capacity as Executive Director
representative/authorized agent/other
certify that Historic Homes Foundation is (are) the owner(s) of the property which
name of LLC / corporation / partnership / association / etc.

is the subject of this application and that I am authorized to sign this application on behalf of the owner(s).

Signature: Kristen Lutes Date: 1-26-24

I understand that knowingly providing false information on this application may result in any action taken hereon being declared null and void. I further understand that pursuant to KRS 523.010, et seq. knowingly making a materially false statement, or otherwise providing false information with the intent to mislead a public servant in the performance of his/her duty is punishable as a Class B misdemeanor.

NON-PUBLIC HEARING VARIANCE AFFIDAVIT FOR THE SUBJECT PROPERTY OWNER(S): PART 2

Date: 2/1/24

We have seen a drawing of the proposed (e.g. garage, addition) FENCE to be constructed at (address) _____

As owners of the property adjacent to the above address, we give our consent and do not object to the planned construction or to the variance that will be required.

Note: If the property is in joint ownership, all owners must sign, or an authorized person must sign (authorized persons must also complete the certification statement). If there is a POA, the property owner is deceased or there are extenuating circumstances, please indicate on the signature line. For additional signatures, use additional copies of the affidavit form.

- X
1. Address: 3115 LEXINGTON ROAD LOUISVILLE, KY 40206 (SACRED HEART SCHOOLS)
Owner Name: PAUL KICHLER Signature: [Signature]
Owner Name: _____ Signature: _____
 2. Address: _____
Owner Name: _____ Signature: _____
Owner Name: _____ Signature: _____
 3. Address: _____
Owner Name: _____ Signature: _____
Owner Name: _____ Signature: _____
 4. Address: _____
Owner Name: _____ Signature: _____
Owner Name: _____ Signature: _____

Certification Statement

A certification statement must be submitted with any application in which the owner(s) of the subject property is (are) a limited liability company, corporation, partnership, association, trustee, etc., or if someone other than the owner(s) of record sign(s) the application.

X

I, PAUL KICHLER, in my capacity as VICE PRESIDENT OF OPERATIONS
representative/authorized agent/other
certify that SACRED HEART SCHOOLS, INC is (are) the owner(s) of the property which
name of LLC / corporation / partnership / association / etc.

is the subject of this application and that I am authorized to sign this application on behalf of the owner(s).

Signature: [Signature] Date: 2/1/2024

I understand that knowingly providing false information on this application may result in any action taken hereon being declared null and void. I further understand that pursuant to KRS 523.010, et seq. knowingly making a materially false statement, or otherwise providing false information with the intent to mislead a public servant in the performance of his/her duty is punishable as a Class B misdemeanor.