

Land Clearance for Redevelopment Authority, City of Sikeston

105 East Center Street
P.O. Box 1063
Sikeston, MO 63801

Property Request Form

Name

Address

Telephone

Email

Property of Interest (address)

Intended use of property

Offer: \$

Signature

I acknowledge that typing my name in the signature box constitutes a digital signature of this document

Date Signed

To be completed by Staff

Status of LCRA Owership

Zoning of Property

Checked by

Date Reviewed by LCRA

Approved _____

Denied _____

Jay Lancaster Director of Public Works
jlancaster@sikeston.org
(573) 471-2512

Print form and bring to Sikeston City Hall or [Submit](#) via email