



APPLICATION FOR PLANNING & ZONING REVIEW

Date: _____

Applicant

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Interest in Property: ☐ Owner ☐ Lessee ☐ Contract Purchaser ☐ Other _____

Property Owner ☐ Check if same as Applicant

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Project Manager / Primary Contact (check one or designate below) ☐ Applicant ☐ Property Owner ☐ Other (below)

Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Consultants (architect, attorney, engineer, landscape architect, planner, etc.)

Name: _____ Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Name: _____ Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Name: _____ Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Name: _____ Company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ E-mail: _____

Property Information

Address / Location: _____

PIN Number(s): _____

Property Size (Acres): _____ Existing Zoning: _____ Proposed Zoning: _____

Existing Land Use(s): _____

Proposed Land Use(s): _____

Required Information & Documents *(submit all checked items and applicable unchecked items to initiate an application)*

- ☒ Legal description of property.
- ☒ Proof of ownership. Copy of recorded deed ONLY.
- ☒ Current copy of commitment for title insurance, title insurance policy, or property profile from title company.
- ☒ Proposed plans drawn to scale (*Plat(s), Site, Architectural Elevations, Landscaping, Signage, Photometric, etc.*).
- ☐ Disclosure of directors, managing members, and any individual or entity holding 7.5% or greater interest (*if a corporation*).
- ☐ Beneficiary disclosure statement certified under oath by Trustee (*if in a trust*).
- ☐ Corporate resolution certified under oath authorizing the signing of this application (*if a corporation*).
- ☒ Plat of survey from a professional land surveyor showing existing structures.
- ☐ Listing and affidavit of notice to property owners within 250 feet, excluding public ROW (*if applicable*).
- ☐ Proposed findings of fact (*if applicable*).
- ☐ Letter of notification to U.S. Army Corps of Engineers (*if applicable*).
- ☐ Environmental assessment (*if applicable*).
- ☐ Petition for annexation (*if applicable, signed and notarized*).
- ☐ Plat of annexation (*if applicable*).
- ☐ Copy of Kane County application (*if requesting 1.5-mile extraterritorial jurisdiction review*).

Requested Review and Approval *(check all that apply)*

- | | | |
|--|--|--|
| <input type="checkbox"/> Annexation / Pre-Annexation | <input type="checkbox"/> PUD Change (Major or Minor) | <input type="checkbox"/> Administrative Review |
| <input type="checkbox"/> Final Plat / PUD | <input type="checkbox"/> Resubdivision | <input type="checkbox"/> Vacation / Abrogation |
| <input type="checkbox"/> Planned Unit Development | <input type="checkbox"/> Rezoning | <input type="checkbox"/> Variance |
| <input type="checkbox"/> Preliminary Plat / PUD | <input type="checkbox"/> Special Use Permit | <input type="checkbox"/> 1.5-Mile Review |
| <input type="checkbox"/> Other: _____ | | |

Purpose Statement *(Purpose of request, proposed use, and specific action sought; attach separate page for additional description)*

APPLICANT - The undersigned on oath hereby states:

I, the undersigned, hereby represent to the VILLAGE that I have full legal capacity to authorize filing of this application. I understand and agree that I am required to pay application fees as established by village ordinance and policy, and that any consultant or staff fees, including but not limited to architectural, engineering, legal, planning, traffic, etc., are the responsibility of the APPLICANT, which will be charged on an hourly basis and the VILLAGE will provide the APPLICANT with an itemized statement of such fees. The APPLICANT agrees to pay the VILLAGE within thirty (30) days of the date of an invoice from the VILLAGE or sooner than such 30-day interval if requested by the VILLAGE. If the APPLICANT does not pay the stated balance in full within the thirty (30) day period, interest shall accrue on the unpaid balance at a rate of eighteen percent (18%) per annum unless otherwise restricted by law. The VILLAGE may also, following written notice to the APPLICANT, direct that all professional staff cease work on this application until invoice(s) is/are paid in full at any time. I further acknowledge and understand this application form alone does not constitute a complete application and the VILLAGE may require additional documents in support of the application, its ordinances, plans and regulations. I state on oath that all representations made in this application and any and all documents submitted in support of the application are true.

Applicant Signature

Date

STATE OF ILLINOIS)
) SS
COUNTY OF KANE)

I, _____, a notary public in and for the County and State aforesaid, do hereby certify that _____, personally known to me to be _____, and personally known to me to be the same person whose name is subscribed to the foregoing application, appeared before me this day in person and acknowledged that they signed and delivered the same instrument as their free and voluntary act and deed in their capacity herein identified, for the uses and purposes therein set forth.

Given under my hand and official seal, this ____ day of _____, 20____.

Notary Public

My Commission Expires:

PROPERTY OWNER - The undersigned on oath hereby states:

I consent and agree to the application for the requested action before the Village of Pingree Grove Planning & Zoning Commission for the property described herein.

I consent to the entry in or upon the property described in this application by an authorized official of the Village of Pingree Grove, Kane County, Illinois, for the purposes of inspecting the property and preparing any reviews or reports deemed necessary in furtherance of the review and processing of this application and any and all proposed improvements, along with the right of entry to post, maintain, and remove such public notices as may be required by law.

I understand and agree that no special use permit, PUD, variance, or any order granted by the Village shall remain valid after six (6) months following approval unless a building permit is obtained and the erection or alteration of building, or the use is commenced within such period of time, time being of the essence, and waive any right to challenge such six-month requirement.

I state there has been no change in ownership of the subject property subsequent to the date of the deed accompanying this application.

I state all representations made in this application and any documents submitted in support of this application are true to the best of my knowledge.

Property Owner Signature

Date

STATE OF ILLINOIS)
) SS
COUNTY OF KANE)

I, _____, a notary public in and for the County and State aforesaid, do hereby certify that _____, personally known to me to be _____, and personally known to me to be the same person whose name is subscribed to the foregoing application, appeared before me this day in person and acknowledged that they signed and delivered the same instrument as their free and voluntary act and deed in their capacity herein identified, for the uses and purposes therein set forth.

Given under my hand and official seal, this ____ day of _____, 20 ____.

Notary Public

My Commission Expires:
