

Application for Plan Commission / Zoning Board of Appeals Review

Applicant

Date _____

Name(s) _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ E-Mail _____

Interest in Property Property Owner Contract Purchaser Lessee Representative Other _____

Property Owner *(if not applicant)*

Name(s) _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ E-Mail _____

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

Name(s) _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ E-Mail _____

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

Name _____ Company _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ E-Mail _____

Name _____ Company _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ E-Mail _____

Name _____ Company _____

Address _____ City _____ State _____ Zip _____

Phone # _____ Fax _____ E-Mail _____

Required Documents *(the following must be submitted before any application can be initiated)*

- 1. Legal description, electronically submitted to comdev@vofil.com
- 2. Proof of ownership. Copy of recorded deed ONLY.
- 3. Current copy of commitment for title insurance.
- 4. Disclosure of directors and any individual or entity holding 7.5% or greater interest (if a corporation)
- 5. Beneficiary disclosure statement certified under oath by Trustee (if in a trust)
- 6. Corporate resolution certified under oath authorizing the signing of this application (if a corporation)
- 7. Notarized letter giving the representative authority to act on the zoning application on behalf of the property owners *(if applicant is not owner)*
- 8. Plat of survey from a professional land surveyor showing existing structures. One plat must be submitted on paper size not exceeding 11" x 17"
- 9. Letter of notification to U.S. Army Corps of Engineers *(if applicable)*
- 10. Two copies of environmental assessment *(if applicable)*
- 11. Petition for annexation *(signed and notarized)*
- 12. Plat of annexation
- 13. Copy of Will County application (if requesting 1.5-mile review)

Property Location

Address / Location _____
PIN Number(s) _____ Property Size (Acres) _____
Existing Zoning _____ Existing Land Use(s) _____

Requested Review (check all that apply)

1.5-Mile Review Preliminary Plat Special Use
 Annexation / Pre-Annexation PUD Change Vacation
 Final Plat Resubdivision Variance
 Planned Unit Development (PUD) Rezoning
 Other _____

Purpose Statement (Purpose for request, proposed uses and specific action sought)

Attach a separate page for additional description

By ascribing my signature below I hereby state that I understand 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. The VILLAGE shall 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. 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 the PROJECT of the APPLICANT until the invoice is paid in full. I further acknowledge and understand that this application form itself does not constitute a complete application and agree that the VILLAGE requires additional documents in support of the application, its ordinances, plans and regulations, and I state on oath that all representations made in this application and any documents submitted in support of the application are true.

Applicant(s) Signature _____
Date

The undersigned on oath states:

I, (We) consent to the application for the requested action before the Plan Commission/Zoning Board of Appeals for the property described herein.
I, (We) consent to the entry in or upon the premises described in this application by an authorized official of the Village of Frankfort, Will and Cook Counties Illinois for the purposes of inspecting the property and preparing any reviews or reports deemed necessary by the submittal, review and processing of this application or for the purpose of posting, maintaining, and removing such notices as may be required by law.
I, (We) understand that no Special Use Permit, PUD, Variance nor any order of the Plan Commission / Zoning Board of Appeals shall be valid for a period six (6) months from the date of such order unless a building permit is obtained within such period and the erection or alteration of a building is started or the use is commenced with such period.
I, (We) state that there has been no change in ownership of the subject property subsequent to the date of the deed and current title commitment accompanying this application.
I, (We) state that all representations made in this application and any documents submitted in support of this application are true.

Signature of Property Owner (If multiple property owners please attach a separate signature page) _____
Date

STATE OF ILLINOIS)
 SS)
COUNTY OF WILL)

I, _____, a Notary Public in the County and State aforesaid, do hereby certify that _____ personally known to me is (are) the person(s) who executed the foregoing instrument in Frankfort, Will and Cook Counties, Illinois, this _____ day of _____, 20____, and appeared before me on this day in person and acknowledged that he/she (they) signed, sealed, and delivered the same instrument for the uses and purposes therein set forth.

Notary Public (seal)