## **VILLAGE OF ANTIOCH, LAKE COUNTY**

## Department of Planning, Zoning & Building

Mailing Address: 874 Main Street Office Location: 882 - B Main Street

Antioch, Illinois 60002

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FILE NO. PZB_	
HEARING DATE	

## REQUEST FOR ZONING CODE AMENDMENT BEFORE THE COMBINED PLANNING COMMISSION AND ZONING BOARD VILLAGE OF ANTIOCH, ILLINOIS

(Submit original plus nineteen copies)

## **PETITION**

TO:	The Chairperson and Members of the Combined Planning Commission and Zoning Board of Appeals, Antioch, Illinois.
Petitio	ners (Names):
certify	that they are the owner(s) of the following described real estate:
	(Attach the Legal Description as shown on Warranty Deed or recent Certified Plat of Survey)
PERM	ANENT INDEX NUMBER(S), (PIN): 02  (From latest real estate tax bill)
	aid premises are now classified under the Zoning Ordinance asat under said classification the petitioner(s) is/are prohibited from building/operating the
followi	ng use(s):
•	sed building/ uses are depicted on the attached drawings prepared by:
	, dated, and made a this petition.
	REFORE, Petitioner(s) request, pursuant to rules and regulations, hold a public hearing as ed for by Illinois Statute and as a result of said hearing, recommend to the Board of

uses to which the ab	Antioch, that the Village Zoning Ordinance be so amended, as to modify the ove described premises may be put, and that said premises be reclassified present Zoning District to the Zoning District.
(Include a zoning pla	t if more than one zoning category is sought.)
Included with the und	derlying zoning request, and an integral part thereof, is a request for:
[ ]	A Special Use pursuant to Title 10.
[ ]	A Special Use - Planned Development pursuant to Title 10 et. seq.; Concept Plan Review, file #DRC
[ ]	Other - Please describe:
	t will not adversely affect the public health, safety, or general welfare of the be in conformity with the Comprehensive Plan in that:
Other reasons for thi	s request are as follows:

(Please attach relevant information concerning other governmental agency reviews of this request, including correspondence, file numbers, background studies, etc.)

Data of Applicant and Own	ner:	
Name of Applicant(s):		
Address of Applicant(s):		
Phone: Day: ( )	Phone Evening: ( )	
Property Interest of Applican	nt(s):	
	(Owner, Contract Purchaser, etc.)	
Name of Owner(s):		
Address of Owner(s):	-	
property must be disclosed. Trust disclosing all the bene	de as amended by Ordinance Number 94-1-3, the If the property is in Trust, submit to the Village Cleeficial owners; If the property is owned by a corpore Officer disclosing all the officers of the corporation	erk a Certificate of poration, submit a
Attorney for the Petitioner:	:	
Phone: ( )	Fax: ( )	
/ /		

I (we) acknowledge that any and all drawings submitted, of buildings and other habitable structures are preliminary in nature; they accurately describe the maximum proposed dimensions of the proposed structures. Final details regarding the construction of such structures shall be in full compliance with the technical codes adopted within the Antioch Village Code, and in force and effect at the time of the specific and complete permit application.

I (we) consent to the entry in or upon the premises described in this application by any authorized official of the Village of Antioch, Illinois, during normal working hours, for the purposes of: viewing the site and/or structures related to this request; and the posting, maintaining, and removing such notices as may be required by law.

I (we) certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true to the best of my (our) knowledge and belief.

APPLICANTS:					
_	(Signature)	applicant	date		
	(Signature)	applicant	date		-
OWNERS:					
	(Signature)	owner		date	_
	(Signature)	owner		date	_
APPLICANT'S ATTORNEY:					
	(Signature)	attorney		date	
=======================================	=========	OFFICE USE ONLY		========	======
REC		FLAT FEE \$			
VBoT	FSCROW DEP \$				