



Village of Lily Lake

43W870 Empire Road, Lily Lake Illinois
Phone 630-365-9677 - Fax 630-365-9827
clerk@villageoflilylake.org
www.villageoflilylake.org

Mailing address:
43W955 Twilight Lane, Suite A, St. Charles, IL 60175

ZONING VARIATION, RE-ZONING OR SPECIAL USE APPLICATION

This application is for:

Zoning Variation

Special Use

Zoning Ordinance Amendment

Re-Zoning (map amendment)

PART I - REQUIRED DOCUMENTATION

To apply, please deliver the following to the Village of Lilly Lake:

- Completed and signed application
- Application Fees (as listed on the "Instructions for filing request for Variation" or "Instructions for Filing Request for Re-zoning or Special Use")
- Proof of ownership or Option (1 copy) (for zoning map amendment)
- SIX complete packets** that include all the information detailed in the "Instructions for filing request for Variation" or "Instructions for Filing Request for Re-Zoning or Special Use".

PART II - APPLICANT INFORMATION

APPLICANT (please print or type)

Name:

Contact:

Address:

Phone:

Fax:

Email:

OWNER (if different from Applicant)

Name:

Contact:

Address:

Phone:

Fax:

Email:

IS THE APPLICANT THE OWNER OF THE SUBJECT PROPERTY? YES [] NO []

(If the Applicant is not the owner of the subject property, a letter from the Owner authorizing the Applicant to file the Application must be attached to this application).

IS THE APPLICANT AND/OR OWNER A TRUSTEE OR A BENEFICIARY OF A LAND TRUST? YES [] NO []

(If the Applicant and/or owner of the subject property is a Trustee of a land trust or a beneficiary(ies) of a land trust, a disclosure statement identifying each beneficiary 1of such land trust by name and address and defining his/her interest therein shall be verified by the Trustee and shall be attached hereto).

PART III - PROPERTY INFORMATION

Address of Property: _____

Parcel Index Number(s) _____

Area of Parcel (Acres) _____

Legal Description A legal description must be attached to this application _____

PART IV - REASONS FOR THE AMENDMENT

Briefly, describe the basis for requesting an amendment to the Comprehensive Plan or the Zoning Ordinance text or map.

PART V - PROPOSED TEXT OF MAP AMENDMENT

Please state the proposed text or proposed map amendment to the Comprehensive Plan or Zoning Ordinance.

I, _____, hereby apply for review and approval of this application and represent that the application, requirements thereof, and supporting information have been completed in accordance with the Village of Lily Lake Ordinances.

Signature of Applicant

Date

If you have any questions or comments, please call the Village of Lily Lake at (630) 365-9677 or email clerk@villageoflilylake.org

STAFF USE ONLY:

Current Zoning: _____ Existing and Use: _____

Comprehensive Plan's recommended Land Use: _____

Proposed Zoning: _____ Proposed Land Use: _____