

CITY OF NAPERVILLE
ZONING VARIANCE FORM

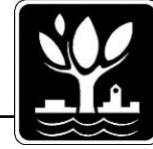


Exhibit A

ADDRESS OF SUBJECT PROPERTY: 133 S. Washington ave. Naperville, Illinois 60540

PARCEL IDENTIFICATION NUMBER (PIN): 07-13-423-022

I. PETITIONER: Saad Zuberi (MT&ZU Ventures LLC)Db a Skinovatio

PETITIONER'S ADDRESS: 154 FOUNTAIN GRASS CIRCLE

CITY: BARLETT STATE: ILLINOIS ZIP CODE: 60103

PHONE: 630 400 2773 EMAIL ADDRESS: STZUBERI414@GMAIL.COM

II. OWNER(S): Claremont One Holdings LLC

OWNER'S ADDRESS: 115 E Ogden Ave STE 105-175

CITY: Naperville STATE: ILLINOIS ZIP CODE: 60563

PHONE: 3127216017 EMAIL ADDRESS: claremontone.llc@gmail.com

III. PRIMARY CONTACT (review comments sent to this contact): SAAD ZUBERI

RELATIONSHIP TO PETITIONER: SAME AS PETITIONER

PHONE: 630 400 2773 EMAIL ADDRESS: STZUBERI414@GMAIL.COM

IV. OTHER STAFF

NAME: FAHAD ZUBERI

RELATIONSHIP TO PETITIONER: Managers

PHONE: 630 281 0375 EMAIL ADDRESS: FAHAD@ARTSPOTCHICAGO.COM

NAME: MARIA KHAN ZUBERI

RELATIONSHIP TO PETITIONER: WIFE

PHONE: 773 910 2349 EMAIL ADDRESS: MARIAJKN@GMAIL.COM

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Exhibit A

V. SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY: B4

AREA OF PROPERTY (Acres or sq ft): 1500 SQ ft

DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code; attached additional pages if needed): Petitioner is a Franchise Medical SPA Establishment currently operating in Illinois with 7 active location servicing Chicagoland and suburban areas

We are seeking a Variance of "General Service Use with Retail" as Per 6-7D-4 of the Municipal Code.

We currently offer about 25% of retail front and accomadate about 60-70% walk in customers


VI. PETITIONER'S SIGNATURE

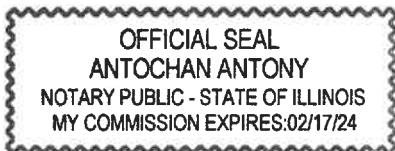
I, SAAD ZUBERI (OWNER) (Petitioner's Printed Name and Title), being duly sworn, declare that I am duly authorized to make this Petition, and the above information, to the best of my knowledge, is true and accurate.


(Signature of Petitioner or authorized agent)

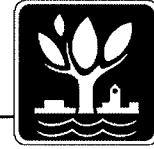
03 - 06 - 2023
(Date)

SUBSCRIBED AND SWORN TO before me this 6th day of MARCH, 2023


(Notary Public and Seal)



ZONING VARIANCE FORM



VII. OWNER'S AUTHORIZATION LETTER

I/we hereby certify that I/we am/are the owner(s) of the above described Subject Property. I/we am/are respectfully requesting processing and approval of the request(s) referenced in this Petition. I/we hereby authorize the Petitioner listed on this Petition to act on my/our behalf during the processing and presentation of this request(s).

[Signature]
(Signature of 1st Owner or authorized agent)

(Signature of 2nd Owner or authorized agent)

3/28/23
(Date)

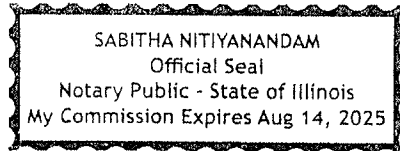
(Date)

Moosa Matarayeh, member
1st Owner's Printed Name and Title

2nd Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 28th day of March, 2023

[Signature]
(Notary Public and Seal)



CITY OF NAPERVILLE
PETITIONER/APPLICANT - DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City.

1. Petitioner: SAAD ZUBERI MT & ZU VENTURES LLC
 Address: 154 FOUNTAIN GRASS CIRCLE, BARTLETT, ILLINOIS 60103

2. Nature of Benefit sought: Seeking approval to open Skinovatio medical spa franchise.
3. Nature of Petitioner (select one):

- | | |
|---------------|--|
| Individual | Partnership |
| Corporation | Joint Venture |
| Land | <u>Limited Liability Corporation (LLC)</u> |
| Trust/Trustee | Sole Proprietorship |
| Trust/Trustee | |

4. If Petitioner is an entity other than described in Section 3, briefly state the nature and characteristics of Petitioner:

5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):

- **Limited Liability Corporation (LLC):** The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
- **Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
- **Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
- **Partnerships:** The type of partnership; the name and address of all general and limited partners, identifying those persons who are limited partners and those who are general partners; the address of the partnership's principal office; and, in the case of a limited partnership, the county where the certificate of limited partnership is filed and the filing number.
- **Joint Ventures:** The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
- **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
- **Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

There are 3 members part of the llc. following is there information.
SAAD ZUBERI - 156 FOUNTAIN GRASS CIRCLE, BARTLETT, ILLINOIS 60103

ANOOP MAMTANI - 6027 N Cicero Ave, Chicago, IL 60646

FAHAD ZUBERI - 1060 ALLUVIAL WAY, SOUTH ELGIN, ILLINOIS 60177

6. Name, address and capacity of person making this disclosure on behalf of the Petitioner:

SAAD ZUBERI - 156 FOUNTAIN GRASS CIRCLE, BARTLETT, ILLINOIS 60103

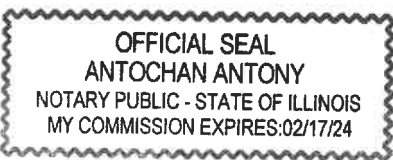
VERIFICATION

I, SAAD ZUBERI (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature: 

Subscribed and Sworn to before me this 6th day of MARCH, 2023.


Notary Public and seal



CITY OF NAPERVILLE
PROPERTY OWNER - DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City.

2. Owner: **CLAREMONT ONE HOLDINGS LLC**
 Address: 115 E. OGDEN AVE STE 105-175
NAPERVILLE, IL 60563

7. Nature of Benefit sought: Seeking approval for tenant to open Skinovatio medical spa franchise.

8. Nature of Owner (select one):

- | | |
|--------------------|--|
| Individual | Partnership |
| Corporation | Joint Venture |
| Land Trust/Trustee | Limited Liability Corporation (LLC) |
| Trust/Trustee | Sole Proprietorship |

9. If Owner is an entity other than described in Section 3, briefly state the nature and characteristics of Owner:

10. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):

- **Limited Liability Corporation (LLC):** The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
- **Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
- **Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
- **Partnerships:** The type of partnership; the name and address of all general and limited partners, identifying those persons who are limited partners and those who are general partners; the address of the partnership's principal office; and, in the case of a limited partnership, the county where the certificate of limited partnership is filed and the filing number.
- **Joint Ventures:** The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
- **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
- **Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

MOOSA MATARIYEH - 115 E OGDEN AVE STE 105-175
NAPERVILLE, IL 60563

11. Name, address and capacity of person making this disclosure on behalf of the Owner:

SAAD ZUBERI - TENANT

VERIFICATION

I, Saad Zuberi (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Owner, that I am duly authorized to make this disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Signature: 

Subscribed and Sworn to before me this 6th day of MARCH, 2023.


Notary Public and seal

