### **DEVELOPMENT PETITION FORM**

DEVELOPMENT NAME (should be consistent of the consistence of the consi	stent with plat): DONKIN GO
ADDRESS OF SUBJECT PROPERT	Y:1671 N. ILLINOIS ROUTE 59, NAPERVILLE, IL 60563
PARCEL IDENTIFICATION NUMBER	R (P.I.N.) <u>07-03-302-005-0000</u>
I. PETITIONER: PRAKASH PATEL	
	NIFER LANE
	STATE: IL ZIP CODE: 60172
	EMAIL ADDRESS: prakashpriti@yahoo.com
	LANE
CITY: ROSELLE	STATE: IL ZIP CODE: 60172
	EMAIL ADDRESS:prakashpriti@yahoo.com
III. PRIMARY CONTACT (review comme	nts sent to this contact):
	ARCHITECT
	EMAIL ADDRESS: <u>HEMAL@PUROHITARCHITECTS.COM</u>
IV. OTHER STAFF	
NAME: N/A	
PHONE:	EMAIL ADDRESS:
NAME:	
RELATIONSHIP TO PETITIONER: _	
PHONE:	FMAIL ADDRESS:

### V. PROPOSED DEVELOPMENT

(check applicable and provide responses to corresponding exhibits on separate sheet)

PZC&CC	☐ Annexation (Exhibit 3)
Processes	☐ Rezoning (Exhibit 4)
	☐ Conditional Use (Exhibit 1)
	☐ Major Change to Conditional Use (Exhibit 1)
	Planned Unit Development (PUD) (Exhibit 2)
	☐ Major Change to PUD (Exhibit 2)
	☐ Preliminary PUD Plat (Exhibit 2)
	☐ Preliminary/Final PUD Plat
	□ PUD Deviation (Exhibit 6)
	☐ Sign Variance (Exhibit 7)
	Subdivision Variance to Section 7-4-4
CC Only	☐ Minor Change to Conditional Use (Exhibit 1)
Process	☐ Minor Change to PUD (Exhibit 2)
1100000	Deviation to Platted Setback (Exhibit 8)
	☐ Amendment to an Existing Annexation Agreement
	☐ Preliminary Subdivision Plat (creating new buildable lots)
	☐ Final Subdivision Plat (creating new buildable lots)
	☐ Preliminary/Final Subdivision Plat (creating new buildable lots)
	<u>,                                     </u>
	Final PUD Plat (Exhibit 2)
	Subdivision Deviation (Exhibit 8)
Administrative	Plat of Right-of-Way Vacation
Administrative	Administrative Subdivision Plat (no new buildable lots are
Review	being created)
Administrative Review	Administrative Adjustment to Conditional Use
Review	Administrative Adjustment to PUD
	☐ Plat of Easement Dedication/Vacation
011	☐ Landscape Variance (Exhibit 5)
Other	☐ Please specify:
ACREAGE OF PRO	PERTY: 0.532
	PROPOSAL/USE (use a separate sheet if necessary)
PROPOSING A 2- STO	DRY BUILDING, WITH DRIVE THRU ONLY "DUNKIN GO" CAFE/ BAKERY PLACE
WITH NO SEATING/ D	DINNING AND AN OFFICE SPACE FOR THE SAME BUSINESS/ OWNER.

VI. REQUIRED SCHOOL AND PARK DONATIO	NS (RESIDENTIAL DEVELOPMENT ONLY)
(per Section 7-3-5: Dedication of Park Lands and Scho	ool Sites or for Payments or Fees in Lieu of)
Required School Donation will be met by:  ☐ Cash Donation (paid prior to plat recordation)  ☐ Cash Donation (paid per permit basis prior to issuance of each building permit)  ☐ Land Dedication	Required Park Donation will be met by:  ☐ Cash Donation (paid prior to plat recordation)  ☐ Cash Donation (paid per permit basis prior to issuance of each building permit)  ☐ Land Dedication
VII. PETITIONER'S SIGNATURE	
sworn, declare that I am duly authorized to make best of my knowledge, is true and accurate.	this Petition, and the above information, to the
ITAKAN J. MA	41412022 (Date)
(Signature of Petitioner or authorized agent)	(Date)
SUBSCRIBED AND SWORN TO before me this	4th day of April , 20 22
Less.	
(Notary Public and Seal)  "OFFICIAL SEAL"  SOLEDAD CAN Notary Public, State Cannols My Commission Expires April 22, 2025.	"OFFICIAL SEAL" SOLFT GAYTAN Notary Pu. of Illinois My Commissio 122, 2025

#### VIII. OWNER'S AUTHORIZATION LETTER<sup>1</sup>

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).

Prakash Sildu		
(Signature of 1st Owner or authorized agent)	(Signature of 2 <sup>nd</sup> Owner or authorized agent)	
4/4/2022		
(Date)	(Date)	
PRAKASH S. PATEL		
1st Owner's Printed Name and Title	2 <sup>nd</sup> Owner Printed Name and Title	

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_, 20\_22

(Notary Public and Seal)

"OFFICIAL SEAL"
SOLEDAD GAYTAN
Notary Public, State of Illinois
My Commission Expires April 22, 2025

<sup>&</sup>lt;sup>1</sup> Please include additional pages if there are more than two owners.

# 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.

	Petitioner: _	PRAKASH PATEL			
	Address: 352 JENNIFER LANE. ROSELLE. IL 60172				
	Nature of Be	enefit sought: ZONING V	ARIANO	CE- PARKING DEFICIENCY, LANDSCAPE VARIANCE	
3. Nature of Petitioner (select one):					
	<u>→ a.</u>	<u>Individual</u>	e.	Partnership	
	b.	Corporation	f.	Joint Venture	
	C.	Land Trust/Trustee	g.	Limited Liability Corporation (LLC)	
	d.	Trust/Trustee	h.	Sole Proprietorship	
	of Petitioner	•	scribed	I in Section 3, briefly state the nature and characteristic	
4.		•	scribed	in Section 3, prietly state the nature and ch	

- 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.

6.	Name, address and capacity of person making the N/A	his disclosure on behalf of the Petitioner:
VEDIE	TOATION.	
1,_P	RAKASH <u>S. PATO</u> (print name), b	eing first duly sworn under oath, depose and state
that I a	am the person making this disclosure on behalf of isclosure, that I have read the above and foregrents contained therein are true in both substance	the Petitioner, that I am duly authorized to make going Disclosure of Beneficiaries, and that the
Signat	ure: Projenh J. My	
Subsc	ribed and Sworn to before me thisday of	April , 20 22.
Notary	Public and seal	"OFFICIAL SEAL" = SOLEDAD GAYTAN  Notary Public, State of Illinois My Commission Expires April 22, 2025

# 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.

١.	OWNER: PRAKASH PATEL			
	Address:	352 JENNIFER LANE,	ROSEL	LE, IL 60172
2.	Nature of Benefit	t sought: <u>ZONING VARI</u>	ANCE-	PARKING DEFICIENCY, LANDSCAPE VARIANCE
3.	Nature of Owner	(select one):		
	<u>→ a.</u>	<u>Individual</u>	e.	Partnership
	b.	Corporation	f.	Joint Venture
	C.	Land Trust/Trustee	g.	Limited Liability Corporation (LLC)
	d.	Trust/Trustee	h.	Sole Proprietorship
4.	If Owner is an er Owner:	ntity other than describe	ed in S	ection 3, briefly state the nature and characteristics o
	N/A			
5.		Section 3 was anything o		nan "Individual", please provide the following information ate sheet):
	members	s, as applicable. If the L	LC wa	The name and address of all members and managing s formed in a State other than Illinois, confirm that it is State's Office to transact business in the State of Illinois
	b. Corpora person w	<b>ition:</b> The name and ado who owns five percent (5	dress ( 5%) or	of all corporate officers; the name and address of every more of any class of stock in the corporation; the State or poration; the State or poration's principal place of business. If the State or

c. **Trust or Land Trust:** The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.

Secretary of State's Office to transact business in the State of Illinois.

incorporation is other than Illinois, confirm that the corporation is registered with the Illinois

- d. 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.
- **e. 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.
- f. **Sole Proprietorship:** The name and address of the sole proprietor and any assumed name.
- g. **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.

6	Name, address and capacity of person making this disclosure on behalf of the Owner:
6.	N/A
<b>VERIFI</b>	CATION
hat I a	The person making this disclosure on behalf of the Owner, that I am duly authorized to make this ure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements ed therein are true in both substance and fact.
Signatu	ire: Prakam s. Potr
	ibed and Sworn to before me this 4th day of 10pcl, 20 22.
Notary	Public and seal  "OFFICIAL SEAL"  SOLEDAD GAYTAN  Notar, Public, State of Illinois My Commission Expires April 22, 2025