

DEVELOPMENT PETITION FORM

DEVELOPMENT NAME (should be consistent with plat): 552 S. WASHINGTON

ADDRESS OF SUBJECT PROPERTY: 552 S. WASHINGTON ST.

PARCEL IDENTIFICATION NUMBER (P.I.N.) 07-24-206-026

I. PETITIONER: NIKOLE CLAY

PETITIONER'S ADDRESS: 3164 OLLETON AVE.

CITY: AURORA STATE: IL ZIP CODE: 60502

PHONE: 630-984-8884
630-740-8092 EMAIL ADDRESS: NIKOLE@SOMASAGEINC.COM

II. OWNER(S): 552 S. WASHINGTON LLC

OWNER'S ADDRESS: 552 S. WASHINGTON

CITY: NAPLESVILLE STATE: IL ZIP CODE: 60540

PHONE: 630 995 3605 EMAIL ADDRESS: SUZIE@ELLSWORTHPARTNERSLLC.COM

III. PRIMARY CONTACT (review comments sent to this contact): NIKOLE CLAY

RELATIONSHIP TO PETITIONER: SELF

PHONE: 630 984 8884
630 740 8092 EMAIL ADDRESS: NIKOLE@SOMASAGEINC.COM

IV. OTHER STAFF

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

V. PROPOSED DEVELOPMENT

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

| | |
|--|--|
| <p>PZC&CC Processes</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Annexation (Exhibit 3) <input type="checkbox"/> Rezoning (Exhibit 4) <input checked="" type="checkbox"/> Conditional Use (Exhibit 1) <input type="checkbox"/> Major Change to Conditional Use (Exhibit 1) <input type="checkbox"/> Planned Unit Development (PUD) (Exhibit 2) <input type="checkbox"/> Major Change to PUD (Exhibit 2) <input type="checkbox"/> Preliminary PUD Plat (Exhibit 2) <input type="checkbox"/> Preliminary/Final PUD Plat <input type="checkbox"/> PUD Deviation (Exhibit 6) <input type="checkbox"/> Zoning Variance (Exhibit 7) <input type="checkbox"/> Sign Variance (Exhibit 7) <input type="checkbox"/> Subdivision Variance to Section 7-4-4 |
| <p>CC Only Process</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Minor Change to Conditional Use (Exhibit 1) <input type="checkbox"/> Minor Change to PUD (Exhibit 2) <input type="checkbox"/> Deviation to Platted Setback (Exhibit 8) <input type="checkbox"/> Amendment to an Existing Annexation Agreement <input type="checkbox"/> Preliminary Subdivision Plat (creating new buildable lots) <input type="checkbox"/> Final Subdivision Plat (creating new buildable lots) <input type="checkbox"/> Preliminary/Final Subdivision Plat (creating new buildable lots) <input type="checkbox"/> Final PUD Plat (Exhibit 2) <input type="checkbox"/> Subdivision Deviation (Exhibit 8) <input type="checkbox"/> Plat of Right-of-Way Vacation |
| <p>Administrative Review Administrative Review</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Administrative Subdivision Plat (no new buildable lots are being created) <input type="checkbox"/> Administrative Adjustment to Conditional Use <input type="checkbox"/> Administrative Adjustment to PUD <input type="checkbox"/> Plat of Easement Dedication/Vacation <input type="checkbox"/> Landscape Variance (Exhibit 5) |
| <p>Other</p> | <ul style="list-style-type: none"> <input type="checkbox"/> Please specify: |

ACREAGE OF PROPERTY: 2.09

DESCRIPTION OF PROPOSAL/USE (use a separate sheet if necessary)

SUITE 207 TO BE OCCUPIED BY
NIKOLE CLAY, CMT, OWNER & PRESIDENT
OF SOMA SAGE HEALTH & HEALING, INC.,
FOR THE PURPOSE OF CLINICAL
MASSAGE THERAPY & GENERAL OFFICE RELATED
THERETO.

VI. REQUIRED SCHOOL AND PARK DONATIONS (RESIDENTIAL DEVELOPMENT ONLY)

(per Section 7-3-5: Dedication of Park Lands and School 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

I, NIXOCE CLAY, CMT (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.

[Handwritten Signature]
 (Signature of Petitioner or authorized agent)

11/7/21
 (Date)

SUBSCRIBED AND SWORN TO before me this 7th day of November, 2021

[Handwritten Signature]
 (Notary Public and Seal)



VIII. OWNER'S AUTHORIZATION LETTER¹

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).

[Handwritten Signature]

(Signature of 1st Owner or authorized agent)

(Signature of 2nd Owner or authorized agent)

11/9/21

(Date)

(Date)

Charles Calvo

1st Owner's Printed Name and Title

2nd Owner Printed Name and Title

SUBSCRIBED AND SWORN TO before me this *4th* day of *NOVEMBER 21* 20*21*

[Handwritten Signature]

(Notary Public and Seal)



¹ Please include additional pages if there are more than two owners.