

CITY OF NAPERVILLE
ZONING VARIANCE FORM



Exhibit A

ADDRESS OF SUBJECT PROPERTY: 240/244 E 4th Ave

PARCEL IDENTIFICATION NUMBER (PIN): 08-18-131-011, 08-18-131-012

I. PETITIONER: David Trollope/Diane Barrowman

PETITIONER'S ADDRESS: 240/244 E 4th Ave

CITY: Naperville STATE: IL ZIP CODE: 60540

PHONE: 630 479 3740 EMAIL ADDRESS: daveanddiane@kringlecottage.com

II. OWNER(S): David Trollope/Diane Barrowman

OWNER'S ADDRESS: 240/244 E 4th Ave

CITY: Naperville STATE: IL ZIP CODE: 60540

PHONE: 630 479 3740 EMAIL ADDRESS: daveanddiane@kringlecottage.com

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

RELATIONSHIP TO PETITIONER: Petitioner is the primary contact

PHONE: 630 479 3740 EMAIL ADDRESS: daveanddiane@kringlecottage.com

IV. OTHER STAFF

NAME: N/A

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

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V. SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY: R2

AREA OF PROPERTY (Acres or sq ft): 13200 sq ft

DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code; attached additional pages if needed):

Petitioner requests a variance from Section 6-2-10:6 to install a fence on two lots of which one does not contain a principle structure

VI. PETITIONER'S SIGNATURE

I, MR DAVID TROLLOPE (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.

Trollope
(Signature of Petitioner or authorized agent)

11/22/2019
(Date)

SUBSCRIBED AND SWORN TO before me this 22nd day of NOVEMBER, 20 19

Carrie A. Ferguson
(Notary Public and Seal)



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Exhibit A

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).

Trollope
(Signature of 1st Owner or authorized agent)

Diane Barrowman
(Signature of 2nd Owner or authorized agent)

11/22/19
(Date)

11/22/19
(Date)

MR DAVID TROLLOPE
1st Owner's Printed Name and Title

DIANE BARROWMAN - WIFE
2nd Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 22nd day of NOVEMBER, 2019

Carrie Ferguson
(Notary Public and Seal)



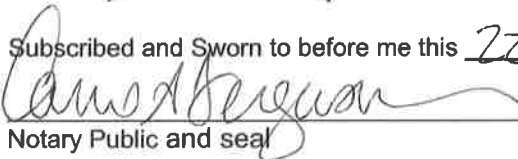
6. Name, address and capacity of person making this disclosure on behalf of the Petitioner:

VERIFICATION

I, MR DAVID TROLLOPE (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 22 day of NOVEMBER, 2019.


Notary Public and seal

