

CITY OF NAPERVILLE
ZONING VARIANCE FORM



Exhibit A

ADDRESS OF SUBJECT PROPERTY: 32 South Columbia Street, Naperville, IL 60540

PARCEL IDENTIFICATION NUMBER (PIN): 08-18-408-005

I. PETITIONER: Mark and Melisa Urda

PETITIONER'S ADDRESS: 11 North Brainard Street

CITY: Naperville STATE: Illinois ZIP CODE: 60540

PHONE: [REDACTED] EMAIL ADDRESS: [REDACTED]

II. OWNER(S): Mark and Melisa Urda

OWNER'S ADDRESS: 11 North Brainard Street

CITY: Naperville STATE: Illinois ZIP CODE: 60540

PHONE: [REDACTED] EMAIL ADDRESS: [REDACTED]

III. PRIMARY CONTACT (review comments sent to this contact): Kathleen C. West

RELATIONSHIP TO PETITIONER: attorney

PHONE: [REDACTED] EMAIL ADDRESS: [REDACTED]

IV. OTHER STAFF

NAME: Tom Ryan

RELATIONSHIP TO PETITIONER: architect

PHONE: [REDACTED] EMAIL ADDRESS: [REDACTED]

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

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VII. PETITIONER'S SIGNATURE

I, Mark Urda (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.

 12/19/25
(Signature of Petitioner or authorized agent) (Date)

SUBSCRIBED AND SWORN TO before me this 19 day of December, 2025


(Notary Public and Seal)



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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 of 1st Owner or authorized agent)



(Signature of 2nd Owner or authorized agent)

12/19/25
(Date)

12/19/25
(Date)

Mark Urda
1st Owner's Printed Name and Title

Melisa Urda
2nd Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 19 day of December, 2025



(Notary Public and Seal)

