### DEVELOPMENT PETITION FORM

DEVELOPMENT NAME (should be consistent with plat): Naper Small Business Park
ADDRESS OF SUBJECT PROPERTY: 1701 Quincy Au
PARCEL IDENTIFICATION NUMBER (P.I.N.) 07-15-401-005
1. PETITIONER: Align Ministnes
PETITIONER'S ADDRESS: 1701 Quincy Ave # 17
CITY: NAPERVIlle STATE: IL ZIP CODE: 60540
PHONE: 630 779 7035 EMAIL ADDRESS: beatder Alignwith Christ. 67
II. OWNER(S): Maper Snall Business, LLC
OWNER'S ADDRESS: 1805 High Grove Lane
CITY: <u>haperville</u> STATE: <u>IZ</u> ZIP CODE: <u>(105 40</u>
PHONE: 630355 8094 EMAIL ADDRESS: LHelmold@mustangconstruction
III. PRIMARY CONTACT (review comments sent to this contact): Robert Carden
RELATIONSHIP TO PETITIONER: TREASURER, Align Ministries
PHONE: 630 779 7035 EMAIL ADDRESS: bearden & Align with Chast. Com.
IV. OTHER STAFF
NAME: Lindo Helmosa
W 2
RELATIONSHIP TO PETITIONER:
PHONE: 630 878 8387 EMAIL ADDRESS: Litelmoldemustary
NAME: Construction com
RELATIONSHIP TO PETITIONER:
EMAIL ADDRESS:

### V. PROPOSED DEVELOPMENT

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

Processes  Rezoning (Exhibit 4) Conditional Use (Exhibit 1) Major Change to Conditional Use (Exhibit 1) Planned Unit Development (PUD) (Exhibit 2)	
<ul><li>☐ Major Change to Conditional Use (Exhibit 1)</li><li>☐ Planned Unit Development (PUD) (Exhibit 2)</li></ul>	
☐ 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)	
☐ Zoning Variance (Exhibit 7)	
Sign Variance (Exhibit 7)	
Subdivision Variance to Section 7-4-4	
CC Only   Minor Change to Conditional Use (Exhibit 1)	
Process	
<ul><li>☐ Deviation to Platted Setback (Exhibit 8)</li><li>☐ Amendment to an Existing Annexation Agreement</li></ul>	
Preliminary Subdivision Plat (creating new buildable lots)	
Final Subdivision Plat (creating new buildable lots)	
Preliminary/Final Subdivision Plat (creating new buildable	ots)
Final PUD Plat (Exhibit 2)	,
Subdivision Deviation (Exhibit 8)	
☐ Plat of Right-of-Way Vacation	
Administrative  Administrative Subdivision Plat (no new buildable lots are	
Review being created)	
Administrative Adjustment to Conditional Use	
Review Administrative Adjustment to PUD	
☐ Plat of Easement Dedication/Vacation	
☐ Landscape Variance (Exhibit 5)	
Other	
ACREAGE OF PROPERTY:	
DECORPTION OF PROPOSAL/USE (vine a recent shoot if passages)	
DESCRIPTION OF PROPOSAL/USE (use a separate sheet if necessary)	

VI. REQUIRED SCHOOL AND PARK DONATION	ONS (RESIDENTIAL DEVELOPMENT ONLY)
(per Section 7-3-5: Dedication of Park Lands and Sch	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.  (Signature of Petitioner or authorized agent)	(Petitioner's Printed Name and Title), being duly e this Petition, and the above information, to the
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#### 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).

(Signature of 1st Owner or authorized agent)

(Signature of 2nd Owner or authorized agent)

(Date)

(Date)

(Date)

Suff Wehrli

2nd Owner Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 3/5t day of October, 2002

(Notary Public and Seal)

Official Seal
Christine M Distazio
Notary Public, State of Illinois
My commission expires 6-15-2025

<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.

1.	Petitioner: Align MINI Address: 1701 QUINCY NAPERVILLE, I	str An	1es ve #17 60540
2. 3.	Nature of Benefit sought: Admin	V15-1	CONDITION USE
	a. Individual b. Corporation c. Land Trust/Trustee d. Trust/Trustee	e. f. g. h.	Partnership  Joint Venture  Limited Liability Corporation (LLC)  Sole Proprietorship
4.	If Petitioner is an entity other than desc of Petitioner:	ribed	in Section 3, briefly state the nature and characteristics

- 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 this disclosure on behalf of the Petitioner:  Robert Co-den, 1701 Quincy Ave #17  Nayerville T2 60540
	nager 11/2 12 60540
I, Canthage Ithat I this can	FICATION  (print name), being first duly sworn under oath, depose and star am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to madisclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the ments contained therein are true in both substance and fact.
Signa	ature:
Subs	cribed and Sworn to before me this 80 day of OC+ , 20 6 2.
Notar	y Public and seal
	Official Seal Christine M Distazio Notary Public, State of Illinois My commission expires 6-15-2025

# CITY OF NAPERVILLE PROPERTY OWNER - DISCLOSURE OF BENEFICIARIES

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ap	provals or ben	efits	voidable by the City.	_	· ·
1.	Owner:	•	Thaper S	mal	L Business, LLC
	Address:				Gnorre-Lane
			haper.	18/10	160540
2.	Nature of Ber	nefit	sought:	odit	ronal USP For Tenant
3.	Nature of Ow	пег	(select one):		
		a.	Individual	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 a Owner:	n en	itity other than describ	oed in Se	ection 3, briefly state the nature and characteristics of
		_			

- 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.
  - b. 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.
  - 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.
  - 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:
	Linda Helmold, Managing Broker
	ICATION
that I a	(print name), being first duly sworn under oath, depose and state im 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 ned therein are true in both substance and fact.
Signati	ure:
Subsci	ribed and Sworn to before me this 3/5 day of
Notary	Official Seal Christine M Distazio Notary Public, State of Illinois My commission expires 6-15-2025