

CITY OF NAPERVILLE
ZONING VARIANCE FORM



Exhibit A

ADDRESS OF SUBJECT PROPERTY: 2517 LINDENWOOD LANE

PARCEL IDENTIFICATION NUMBER (PIN): 02.04.300.002.0000

I. PETITIONER: SAM & PEGGY SIMOS

PETITIONER'S ADDRESS: 2517 LINDENWOOD LANE

CITY: NAPERVILLE STATE: IL ZIP CODE: 60565

PHONE: 630.234.5343 EMAIL ADDRESS: SPSPROPERTIES@SBCGLOBAL.NET

II. OWNER(S): SAM & PEGGY SIMOS

OWNER'S ADDRESS: 2517 LINDENWOOD LANE

CITY: NAPERVILLE STATE: IL ZIP CODE: 60565

PHONE: 630.234.5343 EMAIL ADDRESS: SPSPROPERTIES@SBCGLOBAL.NET

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

RELATIONSHIP TO PETITIONER: ARCHITECT

PHONE: 708.774.9190 EMAIL ADDRESS: P.MAGNER@COMCAST.NET

IV. OTHER STAFF

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

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Exhibit A

V. SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY: E2

AREA OF PROPERTY (Acres or sq ft): 67,924 SQ. FT. (1.56 ACRES)

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

VARIANCE IS REQUESTED FOR RELIEF FROM SECTION 6.2.10(1) IN ORDER TO PERMIT CONSTRUCTION OF A DETACHED ACCESSORY BUILDING NEARER TO THE LOT LINE ADJOINING A STREET THAN THE LONGEST DISTANCE BETWEEN SUCH LOT LINE AND THE NEAREST WALL OF THE PRINCIPAL BUILDING.

VI. PETITIONER'S SIGNATURE

I, Peggy Simos (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.


(Signature of Petitioner or authorized agent)

December 28, 2022
(Date)

SUBSCRIBED AND SWORN TO before me this 28 day of December, 2022


(Notary Public and Seal)





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]
(Signature of 1st Owner or authorized agent)

[Signature]
(Signature of 2nd Owner or authorized agent)

6/22/2022
(Date)

6/22/2022
(Date)

Sam Simos
1st Owner's Printed Name and Title

Reagy Simos
2nd Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 22 day of June, 2022

[Signature]
(Notary Public and Seal)



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.

1. Owner:

Address: 2517 Lindenwood Ln
Naperville, IL 60565

2. Nature of Benefit sought: _____

3. Nature of Owner (select one):

- | | |
|---|---|
| <input checked="" type="checkbox"/> a. Individual | <input type="checkbox"/> e. Partnership |
| <input type="checkbox"/> b. Corporation | <input type="checkbox"/> f. Joint Venture |
| <input type="checkbox"/> c. Land Trust/Trustee | <input type="checkbox"/> g. Limited Liability Corporation (LLC) |
| <input type="checkbox"/> d. Trust/Trustee | <input type="checkbox"/> h. Sole Proprietorship |

4. If Owner is an entity other than described in Section 3, briefly state the nature and characteristics of Owner:

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):

- a. **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:

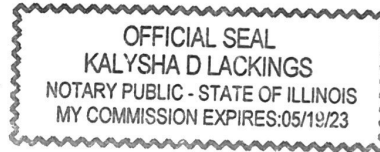
VERIFICATION

I, Sam Simos , Peggy Simos (print name), being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the Owner, 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 19 day of DECEMBER, 20 22.

Notary Public and seal



CITY OF NAPERVILLE
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: SAM & PEGGY SIMOS
Address: 2517 LINDENWOOD LANE
NAPERVILLE, IL 60565

2. Nature of Benefit sought: ZONING VARIATION

3. Nature of Petitioner (select one):

- | | |
|---|---|
| <input checked="" type="checkbox"/> a. Individual | <input type="checkbox"/> e. Partnership |
| <input type="checkbox"/> b. Corporation | <input type="checkbox"/> f. Joint Venture |
| <input type="checkbox"/> c. Land Trust/Trustee | <input type="checkbox"/> g. Limited Liability Corporation (LLC) |
| <input type="checkbox"/> d. Trust/Trustee | <input type="checkbox"/> h. Sole Proprietorship |

4. If Petitioner is an entity other than described in Section 3, briefly state the nature and characteristics of Petitioner:

5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 11 (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:

PATRICK J. MAGNER, 919 THATCHER AVE., RIVER FOREST, IL 60305

VERIFICATION

I, PATRICK J. MAGNER (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: *Patrick J. Magner*

Subscribed and Sworn to before me this 9th day of December, 2022.

Jakub Chyla
Notary Public and seal

