CITY OF NAPERVILLE			
ZONING VARIANCE FORM			
ADDRESS OF SUBJECT PROPERTY: 1141 BASSWOOD DR. PARCEL IDENTIFICATION NUMBER (PIN): 08-30-106-025			
I. PETITIONER: MATTHEW & CASEY CRARY			
PETITIONER'S ADDRESS: 1141 BASS WOOD DR.			
CITY: <u>APERVILLE</u> STATE: <u>TL</u> ZIP CODE: <u>60540</u>			
PHONE: 630432 7602 EMAIL ADDRESS: MATTHEWCRARY @ 911, Com			
II. OWNER(S): MA HEW & CASEY CRARY OWNER'S ADDRESS: 1141 BASSWOOD DR.			
CITY: MAPERVILLE STATE: IL ZIP CODE: 60540			
PHONE: 630 432 7602 EMAIL ADDRESS: MATHEWCRARY @ gunail. com			
III. PRIMARY CONTACT (review comments sent to this contact): <u>MAHAGE</u> RELATIONSHIP TO PETITIONER: <u>SAME</u> PHONE: <u>630</u> 432 7602 EMAIL ADDRESS: <u>MAHAGENCRARY</u> <u>MANIL Com</u>			
IV. OTHER STAFF			
NAME:			
RELATIONSHIP TO PETITIONER:			
PHONE:EMAIL ADDRESS:			
NAME:			

PHONE:_____EMAIL ADDRESS: _____

RELATIONSHIP TO PETITIONER:

CITY OF NAPERVILLE ZONING VARIANCE FORM



v.SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY:

AREA OF PROPERTY (Acres or sq ft):

DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code; attached additional pages if needed): 6-2-10:1 - Location win Steet of property line

6-2-10:3 - Height greater than 18 feet 6-2-10:5 - Percentage of rear yard occupancy greater than 25%

VI.REQUIRED DISCLOSURE

DISCLOSE ANY ORDINANCES, COVENANTS, DEED RESTRICTIONS, OR AGREEMENTS RECORDED AGAINST THE PROPERTY WHICH CURRENTLY APPLY TO OR AFFECT THE PROPERTY.

• For ordinances, provide only the title(s) of the ordinance and their recording number.

- For mortgages, provide only the name of the current mortgagee and the recording number.
- For all other documents, provide an electronic copy with this Petition with the recording number.

FAILURE TO FULLY COMPLY WITH THIS REQUIRED DISCLOSURE WILL ENTITLE THE CITY TO REVOKE ONE OR MORE ENTITLEMENTS SOUGHT IN THIS PETITION.



Exhibit A

VII. PETITIONER'S SIGNATURE

I, <u>Matthew</u> Crary (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.

2024 (Signature of Petitioner er authorized agent)

SUBSCRIBED AND SWORN TO before me this ____day of _____dov 1 20 21 "OFFICIAL SEAL" (Notary Public and Seal) MADILYNE HAILI WILSON Notary Public, State of Illinois My Commission Expires 12/01/2027



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).

(Signature of 1st Owner or authorized agent) (Signature of 2nd Owner or authorized agent)

4/11/2024

hew Crari 1st Owner's Printed Name and Title

Casey Crary ^d Owners Printed Name and Title

SUBSCRIBED AND SWORN TO before me this _____ day of _____ 20 24 "OFFICIAL SEAL" Notary Public and Seal) MADILYNE HAILI WILSON Notary Public, State of Illinois My Commission Expires 12/01/2027

Exhibit D

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: Matthew C	vary	<u>.</u>
	Address: 1141 Basswo	od. Drive	
	Napurville	IL 60540	
2 .	Nature of Benefit sought: Build New garage		
3.	Nature of Petitioner (select one):		
	Individual	Partnership	
	Corporation	n Joint Venture	
	Land Trust/Trust Trust/Trust		

- 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 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:
l,// that la this di	CICATION <u>latthen/Cary</u> (print name), being first duly sworn under oath, depose and state am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make isclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the ments contained therein are true in both substance and fact. ure: <u>Mathematical</u>
M	ribed and Sworn to before me this day of <u>Apvil</u> 20 <u>24</u> . <u>Apvil</u> 20 <u>24</u> . <u>Apvil 20<u>24</u>. <u>Apvil 20<u>24</u>. <u>Apv</u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u></u>

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.

- 7. Nature of Benefit sought: _____
- 8. Nature of Owner (select one):

\checkmark	Individual
•	

Corporation

Land Trust/Trustee Trust/Trustee Limited Liability Corporation (LLC) Sole Proprietorship

Partnership

Joint Venture

- If Owner is an entity other than described in Section 3, briefly state the nature and characteristics of Owner:
- 10. 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.

11.	Name, address and capacity of person making this disclosure on behalf of the Owner:
VERIF	
that I a disclos	(a++++++++++++++++++++++++++++++++++++
Signati	
M	ibed and Sworn to before me this <u>I</u> day of <u>APVI</u> , 20 <u>24</u> . <u>July us</u> <u>H</u> <u>Wilson</u> Public and seal
	"OFFICIAL SEAL" MADILYNE HAILI WILSON Notary Public, State of Illinois My Commission Expires 12/01/2027