

CITY OF NAPERVILLE
ZONING VARIANCE FORM



Exhibit A

ADDRESS OF SUBJECT PROPERTY: 2429 Newport Drive

PARCEL IDENTIFICATION NUMBER (PIN): 07-01-01-210-030-0000

I. PETITIONER: Brent Carios

PETITIONER'S ADDRESS: 2429 Newport Drive

CITY: Naperville STATE: IL ZIP CODE: 60565

PHONE: 630-251-2787 EMAIL ADDRESS: bmcarios@gmail.com

II. OWNER(S): Brent and Colleen Carios

OWNER'S ADDRESS: 2429 Newport Drive

CITY: Naperville STATE: IL ZIP CODE: 60565

PHONE: 630-251-2787 EMAIL ADDRESS: bmearios@gmail.com

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

RELATIONSHIP TO PETITIONER: Same

PHONE: 630-251-2787 EMAIL ADDRESS: bmcarios@gmail.com

IV. OTHER STAFF

NAME: Matt McCaw

RELATIONSHIP TO PETITIONER: Contractor

PHONE: 630-698-8354 EMAIL ADDRESS: mtmccaw@gmail.com

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

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V. SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY: Residential

AREA OF PROPERTY (Acres or sq ft): 7980 sq ft .18 acres

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

See attached pages

VI. PETITIONER'S SIGNATURE

I, Brent Carius (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.

Brent Carius
(Signature of Petitioner or authorized agent)

10/10/20
(Date)

SUBSCRIBED AND SWORN TO before me this 10 day of October, 2020

Hamza Zafar Agha
(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).

Brent Carius

(Signature of 1st Owner or authorized agent)

Colleen Carius

(Signature of 2nd Owner or authorized agent)

10/10/20

(Date)

10/10/20

(Date)

Brent Carius

1st Owner's Printed Name and Title

Colleen Carius

2nd Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 10 day of October, 2020

Hamza Zafar Agha

(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: Brent Carius
 Address: 2429 Newport Drive
Naperville, IL 60565

2. Nature of Benefit sought: Variance for sunroom/addition

3. Nature of Petitioner (select one):

<input checked="" type="radio"/> 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 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:

VERIFICATION

I, Brent Carius (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: *Brent Carius*

Subscribed and Sworn to before me this 10 day of October, 2020.

Hamza Zafar Agha
Notary Public and seal

