

CITY OF NAPERVILLE
PETITION FOR ZONING VARIANCE



Exhibit A

ADDRESS OF SUBJECT PROPERTY: 440 HAWLEY COURT

PARCEL IDENTIFICATION NUMBER (PIN): 07-01-01-404-022-0000

I. PETITIONER: TODD NELMARK

PETITIONER'S ADDRESS: 440 HAWLEY COURT

CITY: NAPERVILLE STATE: IL ZIP CODE: 60565

PHONE: 630-357-8453 EMAIL ADDRESS: T.NELMRK@AOL.COM

II. OWNER(S): TODD & JULIE NELMARK

OWNER'S ADDRESS: 440 HAWLEY COURT

CITY: NAPERVILLE STATE: IL ZIP CODE: 60565

PHONE: 630-357-8453 EMAIL ADDRESS: T.NELMRK@AOL.COM

III. PRIMARY CONTACT (review comments sent to this contact): NELSON GENERAL CONTRACTING

RELATIONSHIP TO PETITIONER: GENERAL CONTRACTOR

PHONE: 630-740-8589 EMAIL ADDRESS: MARC@NELSONGENERALCONTRACTING.COM

IV. OTHER STAFF

NAME: ROAKE AND ASSOCIATES, INC.

RELATIONSHIP TO PETITIONER: ENGINEER

PHONE: 630-355-4490 EMAIL ADDRESS: JCANEFF@ROAKE.COM

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

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V. SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY: R 1A

AREA OF PROPERTY (Acres or sq ft): 14097 SQ FT

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

ADD 3RD CAR GARAGE INTO ALLOWABLE SET BACK PER DRAWING

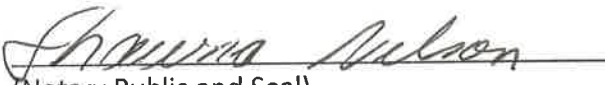
VI. PETITIONER'S SIGNATURE

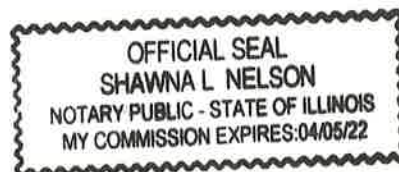
I, Todd Nelmark (Petitioner's Printed Name and Title), being duly sworn, declare that I am duly authorized to make this Petition, and the above information, to the best of my knowledge, is true and accurate.


(Signature of Petitioner or authorized agent)

8/13/2018
(Date)

SUBSCRIBED AND SWORN TO before me this 18th day of August, 20 18


(Notary Public and Seal)



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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)

8/13/2018

(Date)

8/13/2018

(Date)

Todd Nelmark -owner
1st Owner's Printed Name and Title

Julie Nelmark -owner
2nd Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 13th day of August, 2018

(Notary Public and Seal)



**CITY OF NAPERVILLE
DISCLOSURE OF BENEFICIARIES**

EXHIBIT B

In compliance with Ordinance 85-193, An Ordinance amending Title 1 (Administrative) of the Naperville Municipal Code, as amended, by adding Chapter 12 thereto requiring disclosure of certain interests by persons applying for permits, licenses, approvals or benefits from the City of Naperville.

1. Petitioner: TODD NELMARK
Address: 440 HAWLEY COURT
NAPERVILLE, IL 60565

2. Nature of Benefit sought: _____

3. Nature of Applicant (select one):

- | | | | |
|------------------------|-------------------------------------|------------------|--------------------------|
| a. Natural Person | <input checked="" type="checkbox"/> | d. Trust/Trustee | <input type="checkbox"/> |
| b. Corporation | <input type="checkbox"/> | e. Partnership | <input type="checkbox"/> |
| c. Land Trust/ Trustee | <input type="checkbox"/> | f. Joint Venture | <input type="checkbox"/> |

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

5. If in your answer to Section 3 you checked box b, c, d, e or f, identify by name and address each person or entity which is a 5% shareholder in the case of a corporation, a beneficiary in the case of a trust or land trust, a joint venture in the case of case of a joint venture, or who otherwise has a proprietary interest, interest in profits and losses or right to control such entity:

- a. _____
- b. _____
- c. _____
- d. _____

6. Name, address and capacity of person making this disclosure on behalf of the applicant:

IMPORTANT NOTE: In the event your answer to Section 5 identifies entities other than a natural person, additional disclosures are required for each entity.

VERIFICATION

I, Todd Nelmark, being first duly sworn under oath, depose and state that I am the person making this disclosure on behalf of the applicant, 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 13th day of August, 2018

Shawna Nelson
Notary Public and Seal

