## **ZONING VARIANCE FORM**



ADDRESS OF SUBJECT PROPERTY: 923 Watercress DR.
PARCEL IDENTIFICATION NUMBER (PIN): 08 19 403 039
1. PETITIONER: Scott Lucchetti
PETITIONER'S ADDRESS: 28W 490 95th St.
CITY: Naperville STATE: IL ZIP CODE: 60567
PHONE: 847-980-8223 EMAIL ADDRESS: <u>SLucchetti@CBConlin.</u> Con
II. OWNER(S): Kevin Lorenz
OWNER'S ADDRESS: 923 Watercress DRIVE
CITY: Naperville STATE: IL ZIP CODE: (0540
PHONE: 630 294.0866 EMAIL ADDRESS: LURENZ - KEVIN @ Yahoo. Com
III. PRIMARY CONTACT (review comments sent to this contact): Laura Carrera  RELATIONSHIP TO PETITIONER: ADMINISTRATIVE ASSISTANT  PHONE: 331-575-5337EMAIL ADDRESS: Permits X Lala @gmail.com
IV.OTHER STAFF
NAME:
RELATIONSHIP TO PETITIONER:
PHONE:EMAIL ADDRESS:
NAME:
RELATIONSHIP TO PETITIONER:
PHONE:EMAIL ADDRESS:

## **ZONING VARIANCE FORM**

NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 03/06/2025



v. SUBJECT PROPERTY INFORMATION .
zoning of property: Residential
AREA OF PROPERTY (Acres or sq ft): 11, 849 S.F.
DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code; attached additional pages if needed): APPLYING TO Build A 17/X17' Pavilion (289)
With AN outdoor fireplace - However the Code Reads "Accessory
Structures may not occupy More than 25% of Required rear or Interior Side YARD OR A TOTAL of 480 S.F. Whichever is greator
VI. PETITIONER'S SIGNATURE  6-2-10:5 percentage of required yard occupied
I, LAURA CARRERA (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)  5-16-24 (Date)
SUBSCRIBED AND SWORN TO before me this gix teenthoday of May, 20 24
(Notary Public and Seal)
OFFICIAL SEAL

## **ZONING VARIANCE FORM**



## 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 1 <sup>st</sup> Owner or authorized agent)	(Signature of 2 <sup>nd</sup> Owner or authorized agent)
5-16.24 (Date)	(Date)
Keun Lorenz - Homeuwner  1st Owner's Printed Name and Title	2 <sup>nd</sup> Owner's Printed Name and Title
SUBSCRIBED AND SWORN TO before me to	hissixteentday of May, 20 34
(Notary Public and Seal)	
OFFICIAL SEAL CAROL D ROSE NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES: 03/08/2025	

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