ZONING VARIANCE FORM



ADDRESS OF SUBJECT PROPERTY: 2909-3017 SAGAMASHKEE LN.
PARCEL IDENTIFICATION NUMBER (PIN):
I. PETITIONER: NORTHWEST FENCE INC. (JOHN KEEFE, CEO)
PETITIONER'S ADDRESS: 155375. WFBFR PD.
CITY: ROMENUE STATE: U ZIP CODE: 4044
PHONE (815) 834-8731 EMAIL ADDRESS: NORTHWEST CEDAR PRIDUCTS EXT. 2.
11. OWNER(S): NICOLE ABDALLAH (REMINGTON AT TAIL GRASS PRESIDE
OWNER'S ADDRESS: 2909-3017 SAGANASHKEE LAS.
CITY: NAPEDVILLE STATE: 16 ZIP CODE: 40504
PHONE (180) 142-9137 EMAIL ADDRESS: NABDALLAH DINDHFALTHCAKE
III. PRIMARY CONTACT (review comments sent to this contact):
RELATIONSHIP TO PETITIONER: EXECUTIVE ASSISTANT
PHONE (815) 850-8731 EMAIL ADDRESS: TAY COR. NWCD & GMAIL. CON
EXT. 2
IV. OTHER STAFF
NAME:
RELATIONSHIP TO PETITIONER:
PHONE:EMAIL ADDRESS:
NAME:
RELATIONSHIP TO PETITIONER:
DUONE: EMAII ADDRESS:

ZONING VARIANCE FORM



v. SUBJECT PROPERTY INFORMATION			
ZONING OF PROPERTY: BACKYARD FENCE			
AREA OF PROPERTY (Acres or sq ft): 1350' DF FENCING			
DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code attached additional pages if needed): PRODOSING FOR A FENCE TO BE 10' N			
HEIGHT OPPOSED TO 9' ON/ALONG MAJOR AFTERIAU ROADWAY.			
REFERENGI TO 19-2-12:1.10 4 1.7.			
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.			
PLEASE SEE DISCLOSURE ON NEXT DAGE.			



VII. PETITIONER'S SIGNATURE	
1, JOHN KEEFE, CEO	(Petitioner's Printed Name and Title), being duly
sworn, declare that I am duly authorized to make	ke this Petition, and the above information, to the
best of my knowledge, is true and accurate.	
(Signature of Petitioner or authorized agent)	01/22/2025 (Date)
SUBSCRIBED AND SWORN TO before me th	is 22 Dday of JANUARY, 2025
-1 21	
(Notary Public and Seal)	
agai pairait	W.
Notary Public, State of Illinois Official Seal Taylor M Pheiffer Commission # 998837	1. Cloud 1
Commission # 998837 My Commission Expires 10/21/2028	



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 st Owner or authorized agent)	(Signature of 2 nd Owner or authorized agent)
<u>1-6-2025</u> (Date)	(Date)
NiCOLE ABDALL AH 1st Owner's Printed Name and Title	2 nd Owner's Printed Name and Title
SUBSCRIBED AND SWORN TO before me to	this (1th day of JANWAR), 2025
AUDN M. PHEIFER Tool Age (Notary Public and Seal)	
Notary Public, State of Illinols Official Seal Taylor M Phelifer Commission # 998837 My Commission Explices 10/21/2028	J LN. , 12. Cen487