

PETITION FOR ZONING VARIANCE



Exhibit A

ADDRESS OF SUBJECT PROPERTY: 2304 SPIKEHORN AVE

PARCEL IDENTIFICATION NUMBER (PIN): 01-15-407-011

I. PETITIONER: John and Ginny Colburn

PETITIONER'S ADDRESS: 2304 SPIKEHORN AVE

CITY: NAPERVILLE STATE: IL ZIP CODE: 60564

PHONE: 630-904-6325 EMAIL ADDRESS: ginny_colburn@hotmail.com

II. OWNER(S): John and Ginny Colburn

OWNER'S ADDRESS: 2304 SPIKEHORN AVE

CITY: NAPERVILLE STATE: IL ZIP CODE: 60564

PHONE: 630-904-6325 EMAIL ADDRESS: ginny_colburn@hotmail.com

III. PRIMARY CONTACT (review comments sent to this contact): Ginny Colburn

RELATIONSHIP TO PETITIONER: self

PHONE: 630-464-5869 cell EMAIL ADDRESS: ginny_colburn@hotmail.com

IV. OTHER STAFF

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

NAME: _____

RELATIONSHIP TO PETITIONER: _____

PHONE: _____ EMAIL ADDRESS: _____

CITY OF NAPERVILLE
PETITION FOR ZONING VARIANCE



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V. SUBJECT PROPERTY INFORMATION

ZONING OF PROPERTY: 2304 SPIKEHORN AVE

AREA OF PROPERTY (Acres or sq ft): 1/4 acre

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

We have built a pergola in our backyard. Because of existing pool and established
landscaping, as well as a steep incline in the yard, we are unable to put the pergola
anywhere else.

VI. PETITIONER'S SIGNATURE

I, Virginia L Colburn (Ginny) (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.

Virginia L Colburn
(Signature of Petitioner or authorized agent)

3/14/18
(Date)

SUBSCRIBED AND SWORN TO before me this 14th day of March, 2018

[Signature]
(Notary Public and Seal)



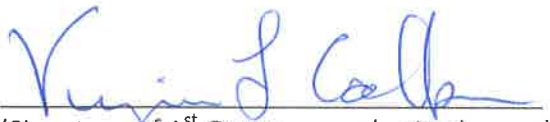
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Exhibit A

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)

3/14/18
(Date)


(Signature of 2nd Owner or authorized agent)

3/14/18
(Date)


1st Owner's Printed Name and Title
Mrs Virginia L Colburn
(Ginny)


2nd Owner's Printed Name and Title
Mr. John Colburn

SUBSCRIBED AND SWORN TO before me this 14th day of March, 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: John and Ginny Colburn
Address: 2304 SPIKEHORN AVE
NAPERVILLE IL 60564

2. Nature of Benefit sought: ZONING VARIANCE

3. Nature of Applicant (select one):

- | | | | |
|------------------------|-------------------------------------|------------------|--------------------------|
| a. Natural Person | ☒ | d. Trust/Trustee | ☐ |
| b. Corporation | ☐ | e. Partnership | ☐ |
| c. Land Trust/ Trustee | ☐ | f. Joint Venture | ☐ |

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, Virginia L Colburn (Ginny), 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: Virginia L Colburn

Subscribed and Sworn to before me this 14th day of March, 2018

[Signature]
Notary Public and Seal

