## CITY OF NAPERVILLE

# PETITION FOR ZONING VARIANCE



ADDRESS OF SUBJECT PROPERTY:	11 Maple Lane			
ADDRESS OF SUBJECT PROPERTY: _ PARCEL IDENTIFICATION NUMBER (	PIN): 07-24-211-00	08		
I. PETITIONER: Chad Stoecker	3			
PETITIONER'S ADDRESS: 11 Maple		3	60540	
CITY: Naperville				
PHONE: 630-340-1990	EMAIL ADDRESS:	cstoeck@yahoo.com		
II. OWNER(S):Chad Stoecker				
OWNER'S ADDRESS: 11 Maple L	ane			
CITY: Naperville	STATE:	ZIP CODE:	60540	
PHONE: 630-340-1990				
III. PRIMARY CONTACT (review comments sent to this contact):				
RELATIONSHIP TO PETITIONER:S				
PHONE: 630-340-1990	_ EMAIL ADDRESS: _	cstoeck@yahoo.com		
IV. OTHER STAFF				
NAME:				
RELATIONSHIP TO PETITIONER:				
PHONE:	_ EMAIL ADDRESS: _			
NAME:				
RELATIONSHIP TO PETITIONER:			<del></del>	
PHONE:	_ EMAIL ADDRESS: _			

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## PETITION FOR ZONING VARIANCE



V. SUBJECT PROPERTY INFORMATION	
ZONING OF PROPERTY: Residential	
AREA OF PROPERTY (Acres or sq ft): 23,048 S	Square Feet
•	relevant Section numbers of Municipal Code; attached additional 1.1, 1.2, 1.3, 1.4 to place a 6 foot privacy fence
	tion intends to have a "dog-eared" layout to
maintain visibility and comply with 6-2-13.	
VI. PETITIONER'S SIGNATURE  Chad Stoecker	(Petitioner's Printed Name and Title), being duly sworn,
declare that I am duly authorized to make this F knowledge, is true and accurate.	Petition, and the above information, to the best of my
Mowiedge, is true drid decorate.	12/31/18
(Signature of Petitioner or authorized agent)	(Date)
SUBSCRIBED AND SWORN TO before me this	31st day of December, 2018
Muse Muhales (Notary Public and Seal)	OFFICIAL SEAL GRACE MICHALAK Notary Public - State of Illinois

### CITY OF NAPERVILLE

## PETITION FOR ZONING VARIANCE



#### **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).

1000	AMUCALI
Signature of 1 <sup>st</sup> Owner or authorized agent)	(Signature of 2 <sup>nd</sup> Owner or authorized agent)

(Date) (Date)

Chad Stoecker Ashley Stoecker

1<sup>st</sup> Owner's Printed Name and Title 2<sup>nd</sup> Owner's Printed Name and Title

SUBSCRIBED AND SWORN TO before me this 3 day of December, 2018

(Notary Public and Seal)

OFFICIAL SEAL GRACE MICHALAK Notary Public - State of Illinois My Commission Expires 5/04/2022

# CITY OF NAPERVILLE DISCLOSURE OF BENEFICIARIES

#### Ехнівіт В

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.

Address:	1	Petitioner: Chad Stoecken
2. Nature of Benefit sought: Fencing Voyconce  3. Nature of Applicant (select one):  a. Natural Person		Address: Il Maple Lane
a. Natural Person		Naperville, IL, 60540
a. Natural Person	2.	Nature of Benefit sought: Fencing Variance
b. Corporation	3.	Nature of Applicant (select one):
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 join 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.  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  VERIFICATION  Locker  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 21st day of Chimary Public and Seal  OFFICIAL SEAL GRACE MICHALAK		a. Natural Person 🔼 d. Trust/Trustee 🗌
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 join 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  VERIFICATION  Locked  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 31st day of Chemical Signature:  Subscribed and Sworn to before me this 31st day of Chemical Signature:  Subscribed and Sworn to before me this 31st day of Chemical Seal  OFFICIAL SEAL GRACE MICHALAK		b. Corporation
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 join 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.  DECKED  III  Decked  III		c. Land Trust/ Trustee f. Joint Venture
which is a 5% shareholder in the case of a corporation, a beneficiary in the case of a trust or land trust, a join 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  VERIFICATION  I.  Stoecker  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 add day of Clember 1, 2016  OFFICIAL SEAL GRACE MICHALAK	4.	If applicant is an entity other than described in Section 3, briefly state the nature and characteristics of applicant:
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, 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 day of Official SEAL GRACE MICHALAK	5.	which is a 5% shareholder in the case of a corporation, a beneficiary in the case of a trust or land trust, a join venture in the case of case of a joint venture, or who otherwise has a proprietary interest, interest in profits and
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VERIFICATION I,		
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Subscribed and Sworn to before me this 31st day of 100 mour , 2016  Notary Public and Seal  OFFICIAL SEAL GRACE MICHALAK	I,( person read th	being first duly sworn under oath, depose and state that I am the making this disclosure on behalf of the applicant, that I am duly authorized to make this disclosure, that I have above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both
Notary Public and Seal  OFFICIAL SEAL GRACE MICHALAK	Signatu	9/07
GRACE MICHALAK	Subscr	ibed and Sworn to before me this <u>bird</u> day of <u>Illimbir</u> , 20 <u>C</u>
GRACE MICHALAK		male William SEAL
MUSIN FIRM: - JUNE IN MILLON F	Notary	GRACE MICHALAK

My Commission Expires 5/04/2022