CITY OF NAPERVILLE PETITION FOR DEVELOPMENT APPROVAL

DEVELOPMENT NAME (should be consistent with plat): TRUBY HILTON SUBDIVISION ADDRESS OF SUBJECT PROPERTY: 1915 WEST DIEHL ROAD, NAPERVILL, IL. PARCEL IDENTIFICATION NUMBER (P.I.N.) 07-04-401-046/07-04-401-047.

I. PETITIONER: MCUBE GLOBAL, NC.
PETITIONER'S ADDRESS: 3701 W. ALCONQUIN RD., SNITE 740
CITY: ROLLING MAADOWS STATE: IL, ZIP CODE: 60008
PHONE: 841.749-1704 EMAIL ADDRESS: APATEL @ SHRINAY.COM
II. OWNER(S): ZJ CHASE INVESTMENT GROUP, LLC.
OWNER'S ADDRESS: 39 W665 GOLDENROD DRIVE
CITY: ST. CHARLES STATE: IL. ZIP CODE: 60175
PHONE: 815-751-9181 EMAIL ADDRESS: THAKKARDHAVAL@ HOTMAIL, CON
III. PRIMARY CONTACT (review comments sent to this contact): AMARISH PATEL
RELATIONSHIP TO PETITIONER: OWNER PETITIONER REP.
PHONE: 847-754-1064 EMAIL ADDRESS: APATEL@SHRINAY. (OM
IV. OTHER STAFF
NAME: EDWARD SEIFERT INTECH CONSULTANTS INC.
RELATIONSHIP TO PETITIONER: SITE ENGNER
PHONE: 630-964-5656 EMAIL ADDRESS: SEIFERT @
NAME:
RELATIONSHIP TO PETITIONER:
PHONE: EMAIL ADDRESS:

V. PROPOSED DEVELOPMENT

(check applicable and provide responses to corresponding exhibits on separate sheet)

	ending or Granting a Conditional Use hibit 1)*		Landscape Varia	nce (Exhibit 5))
	ending or Granting a Planned Unit elopment (Exhibit 2)		Planned Unit [(Exhibit 6)	Development	Deviation
Ann	exation (Exhibit 3)		Sign Variance (E	xhibit 7)	
Plat	of Easement/Vacation/Dedication		Zoning Variance	(Exhibit 7)	
Rez	oning (Exhibit 4)		Platted Setback	Deviation (Exh	nibit 8)
Sub	division Plat		Subdivision Devi	ation/Waiver (Exhibit 8)
Terr	nporary Use		Other (Please Sp	ecify:)
*When red instead of	questing approval of a Small Wind and/or a Exhibit 1.	Sola	r Renewable Energ	y System comp	lete Exhibit 9
COM	PTION OF PROPOSAL/USE (use a sepa UTRUCTION OF 4-ST ITT INFRASTUCTURE	DA	7 121-6	DOM HO	TEL-
(per Section	JIRED SCHOOL AND PARK DONATION on 7-3-5: Dedication of Park Lands and Sch d School Donation will be met by: h Donation (paid prior to plat	ool S	•	ts or Fees in Lie Ition will be me	u of) et by :
reco Casl to is:	rdation) h Donation (paid per permit basis prior suance of each building permit) d Dedication		recordation) Cash Donation (prior to issuance Land Dedication	paid per permi	t basis

PETITIONER'S SIGNATURE

I, <u>AMAPISH PATEL</u> (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.

7/2/19.

(Signature of Petitioner or authorized agent)

(Date)

2019 SUBSCRIBED AND SWORN TO before me this day of TAL

(Notary Public and Seal)

TATIANA L AGEE Official Seal Notary Public - State of Illinois My Commission Expires Apr 28, 2020

OWNER'S AUTHORIZATION LETTER¹

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)

06/301/2019

(Date)

06/2012019

(Date)

Jigisha Thankky

1st Owner's Printed Name and Title

)howed Thankkey

(Signature of 2nd Owner or authorized agent)

2nd Owner Printed Name and Title

SUBSCRIBED AND SWORN TO before me this

dav of

(Notary Public and Seal)

TATIANA L AGEE Official Seal Notary Public - State of Illinois My Commission Expires Apr 28, 2020

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¹ Please include additional pages if there are more than two owners.

CITY OF NAPERVILLE DISCLOSURE OF BENEFICIARIES

In compliance with Title 1 (Administrative), Chapter 12 (Disclosure of Beneficiaries) of the Naperville Municipal Code ("Code"), as amended, the following disclosures are required when any person or entity applies for permits, licenses, approvals, or benefits from the City of Naperville unless they are exempt under 1-12-5:2 of the Code. Failure to provide full and complete disclosure will render any permits, licenses, approvals or benefits voidable by the City.

1.	Petitioner: M CUBE GLO	BAL, INC.	
	Address: 3701 W, ALC	ONQUIN RD., SUITE 740	
	ROLLING MOR	Dows, 12, 60008	
2.	Nature of Benefit sought:	D UDE ENTITLEMENTS	
3.	Nature of Petitioner (select one):		
	a. Individual	e. Partnership	
	b. Corporation	f. Joint Venture	
	c. Land Trust/Trustee	g. Limited Liability Corporation (LLC)	

d. Trust/Trustee h. Sole Proprietorship

- 4. If Petitioner is an entity other than described in Section 3, briefly state the nature and characteristics of Petitioner:
- 5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 9 (or on a separate sheet):
 - Limited Liability Corporation (LLC): The name and address of all members and managing members, as applicable. If the LLC was formed in a State other than Illinois, confirm that it is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - **Corporation:** The name and address of all corporate officers; the name and address of every person who owns five percent (5%) or more of any class of stock in the corporation; the State of incorporation; the address of the corporation's principal place of business. If the State of incorporation is other than Illinois, confirm that the corporation is registered with the Illinois Secretary of State's Office to transact business in the State of Illinois.
 - **Trust or Land Trust**: The name, address and interest of all persons, firms, corporations or other entities who are the beneficiaries of such trust.
 - **Partnerships:** The type of partnership; the name and address of all general and limited partners, identifying those persons who are limited partners and those who are general partners; the address of the partnership's principal office; and, in the case of a limited partnership, the county where the certificate of limited partnership is filed and the filing number.
 - Joint Ventures: The name and address of every member of the joint venture and the nature of the legal vehicle used to create the joint venture.
 - Sole Proprietorship: The name and address of the sole proprietor and any assumed name.
 - **Other Entities:** The name and address of every person having a proprietary interest, an interest in profits and losses or the right to control any entity or venture not listed above.

	AMARISH PATEL, COPPORATE OFFICEN & SOLE OWNER.
	4717 WELLINGTON DRIVE, LONG GROVE, 11, 60047.
6.	Name, address and capacity of person making this disclosure on behalf of the Petitioner:
	AMARISH PATEL, POTITIONER RSP.
	4717 WELLINGTON DRIVE LONG GROVE, 12, 60047,
VERIFI	CATION
I, A	MAAISH PATEL (print name), being first duly sworn under oath, depose and state
that I a	m the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make sclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the
	ents contained therein are true in both substance and fact.
Signatu	ire:
	tod
Subscri	ibed and Sworn to before methis 2nd day of July, 2019
\subseteq	Fauera the
Notary	Public and seal
	TATIANA L AGEE Official Seal Notary Public - State of Illinois
	My Commission Expires Apr 28, 2020