# **ZONING VARIANCE FORM**



<b>ADDRESS OF SUBJECT</b>	PROPERTY: 12 W	/ Jefferson					
PARCEL IDENTIFICATION NUMBER (PIN): 07-13-430-016							
I. PETITIONER: The Lovesac Company, NASDAQ							
PETITIONER'S ADDRESS: Two Landmark Square, Suite 300							
CITY: Stamford	STATE:_CT	ZIP CODE: 06901					
PHONE: 203-539-9076	EMAIL ADDRESS:	clarygroen@lovesac.com					
II. OWNER(S): Naperville 12 Jefferson LLC							
OWNER'S ADDRESS: 2 Ethel	Road, Suite 205A						
CITY: Edison	STATE:_NJ	ZIP CODE: 08817					
PHONE: 312-205-4410	ONE: 312-205-4410 EMAIL ADDRESS: jmorse@pfs-law.com						
III. PRIMARY CONTACT (review comments sent to this contact):Ross Modjeska							
RELATIONSHIP TO PETITION	NER: Lovesac's Brokei	•					
PHONE: 312-784-2758	EMAIL ADDRESS:	rmodjeska@mccafferyinc.com					
IV. OTHER STAFF							
NAME:							
RELATIONSHIP TO PETITIONER:							
PHONE:	EMAIL ADDRESS:						
NAME:							
RELATIONSHIP TO PETITIONER:							
PHONE:	EMAIL ADDRESS:						

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V. SUBJECT PROPERTY INFORMATION					
ZONING OF PROPERTY:B4					
AREA OF PROPERTY (Acres or sq ft): 1,400 sq ft					
DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code; attached additional pages if needed):					
Seeking a variance to Section 6-7D-4:1 (B4: Required Conditions) to permit a general service use					
(showroom) to be located on the first floor in the B4 zoning district.					
VI. PETITIONER'S SIGNATURE  I, Clary Groen  (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)  (Date)					
SUBSCRIBED AND SWORN TO before me this 30 day of 4 favory, 2020  KM LEWIS Official Seal Notary Public - State of Illinois My Commission Expires Mar 14, 2022					

### **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).

Jan				
(Signature of 1 <sup>st</sup> Owner or authorized agent)	(Signature of 2 <sup>nd</sup> Owner or authorized agent)			
2/11/Zozo (Date)	(Date)			
HYMIEMISHAN MANAGER  1st Owner's Printed Name and Title	2 <sup>nd</sup> Owner's Printed Name and Title			
SUBSCRIBED AND SWORN TO before me this _// day of FEBRUSIA_, 20 20				
ANTOINETTE MARIE COLOREO NOTARY PUBLIC, STATE OF NEW YORK No. 01-CO6194107 Qualified in Richmond County My Commission Expires Sept. 29, 2020				

#### 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.	Fellioner. The Lovesde Company, Wilderig			100		
	Address: Two Landmark Square, Suite 300					
	St	Stamford, CT 06901				
2.	Nature of Benefit sought: Variance to permit a general service use					
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:

Publicly traded national corporation

Potitionari The Lovesac Company NASDAO

- 5. If your answer to Section 3 was anything other than "Individual", please provide the following information in the space provided on page 11 (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.

	Shawn Nelson, Founder & CEO	s
	Jack Krause, President & COO	
	Donna Dellomo, Exec VP & CFO	Two Landmark Square, Suite 300
	David Jenson, CTO & CIO	Stamford, CT 06901
6.	Name, address and capacity of person making	ng this disclosure on behalf of the Petitioner:
VERIFIC	CATION	
VERIFIC	CATION	
		e), being first duly sworn under oath, depose and state
		If of the Petitioner, that I am duly authorized to make foregoing Disclosure of Beneficiaries, and that the
	ents contained therein are true in both substar	
Signatu	re: Ross Modjeska	
		Jana Caracana
Subscrib	bed and Sworn to before me this $03$ day of $Fe$	ebuary, 2020 K M LEWIS Official Seal
X	ULewer	Notary Public – State of Illinois My Commission Expires Mar 14, 2022
Notary F	Public and seal	