ZONING VARIANCE FORM



ADDRESS OF SUBJECT	PROPERTY: 110	S. Washington St., Naperville, IL 6	50540
PARCEL IDENTIFICATION	N NUMBER (PIN):	07-13-424-006	
I. PETITIONER: Great Cen	tral Properties III, LI	.C	
PETITIONER'S ADDRESS: 12	255 Bond Street, Suit	e 111	
CITY: Naperville	STATE:IL	ZIP CODE:60563	
PHONE: 630-848-0320	EMAIL ADDRESS:	dwight@avrambuilders.com	
II. OWNER(S): Great Cent	ral Properties III, LLC	C	
OWNER'S ADDRESS: 1255 I	Bond Street, Suite 111		
CITY:_Naperville	STATE:IL	ZIP CODE: 60563	
PHONE: 630-848-0320	EMAIL ADDRESS:	dwight@avrambuilders.com	
III. PRIMARY CONTACT (re	eview comments sent to thi	s contact): Paul M. Mitchell	
RELATIONSHIP TO PETITION	ER: Attorney		
PHONE: 630-753-8065	EMAIL ADDRESS:	paul.mitchell@kuhnlaw.com	
IV. OTHER STAFF			
NAME: Kluber Inc. (Michael	Elliot)		
RELATIONSHIP TO PETITION	ER: Architect/Engir	neer	
PHONE: 630-406-9472	_EMAIL ADDRESS:	melliot@kluberinc.com	la .
NAME:			
PHONE:			

ZONING VARIANCE FORM



V. SUBJECT PROPERTY INFORMATION
ZONING OF PROPERTY: B4 Downtown Core District
AREA OF PROPERTY (Acres or sq ft): 0.569 acres
DETAILED DESCRIPTION OF VARIANCE (include relevant Section numbers of Municipal Code; attached additional pages if needed): Section 6-7D-7 of the Municipal Code requires all new construction to be setback NO GREATER than 6 feet. If the
seat walls shown in the approved plans are removed as requested by a prospective retail tenant, the new building
would have a maximum setback of 18.5 feet. The building is already built and with this setback so that more of the
old Nichols Library building could be seen from Washington Street.
VI. PETITIONER'S SIGNATURE
I, Dwight Avram, Manager (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 28th day of Agus (, 2020
(Notary Public and Seal) Official Seal Paul M Mitchell Notary Public State of Illinois My Commission Expires 11/18/2021

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).

Great Central Properties III, LLC	
By:	
(Signature of 1 st Owner or authorized agent)	(Signature of 2 nd Owner or authorized agent)
A. 5 (+ 76 303 ()	
August 18 2020 (Date)	
(Date)	(Date)
D : 1. A	
Dwight Avram, Manager	
1 st Owner's Printed Name and Title	2 nd Owner's Printed Name and Title
CURCODIRED AND CIMODN TO Lessen was	us official A a st on 3 a
SUBSCRIBED AND SWORN TO before me	this 28th day of A-gust, 20 20
believe	,
(Notary Public and Seal)	
, , , , , , , , , , , , , , , , , , , ,	
AA. A.	
Official Seal	
Paul M Mitchell Notary Public State of Illinois	
My Commission Expires 11/18/2021	

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	Great Central Properties III,	LLC
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Address: 1255 Bond Street, Suite 111

Naperville, IL 60563

- 2. Nature of Benefit sought: Zoning Variance
- 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 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.

	Great Central Properties IV, LLC, 1255 Bond Street, Suite III, Naperville, IL 60565
	T2 Washinton St I, LLC, 120 N. Hale Street, Suite 303, Wheaton, IL 60187
6.	Name, address and capacity of person making this disclosure on behalf of the Petitioner:
	Dwight Avram, Manager
VERIF	FICATION
ı Dv	vight Avram (print name), being first duly sworn under oath, depose and state
that I	am the person making this disclosure on behalf of the Petitioner, that I am duly authorized to make
this d staten	isclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the nents contained therein are true in both substance and fact.
otaton	Terris softained tycicin are true in both substance and fact.
Signat	ture: MM
Olginai	arc
Subsc	cribed and Sworn to before me this 28 Mday of August, 20 20
h	Chille Chile this <u>scorr</u> day of <u>11 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 - 7 -</u>
Notary	/ Public and seal
	Official Seal Paul M Mitchell Notary Public State of Illinois My Commission Expires 11/18/2021
	AA A A A A A A A A A A A A A A A A A A