



**PLANNING AND ZONING COMMISSION PUBLIC HEARING APPLICATION**

Subject Property
Address(es) _____
Land Use _____ Zoning Designation(s) _____
Number of Parking Spaces _____
Property Area (Sq.ft. / Acreage) _____ Parcel Number(s) (PIN) _____
Planning / Zoning Request (s) (check all that apply)
<input type="checkbox"/> Pre-Annexation Agreement <input type="checkbox"/> Annexation <input type="checkbox"/> Plat (Annex., Sub., Resub., Consolidation, Vacation)
<input type="checkbox"/> Planned Development for _____ <input type="checkbox"/> Zoning Text Amendment Section(s) _____
<input type="checkbox"/> Special Use for _____ <input type="checkbox"/> Rezoning (Map Amendment) from _____ to _____
<input type="checkbox"/> Variation – If requesting a variation, check at least one of the following:
<input type="checkbox"/> The property in question cannot yield a reasonable return if permitted to be used only under the conditions allowed by the regulations governing the district in which it is located;
<input type="checkbox"/> The requested relief is due to unique circumstances; and/or
<input type="checkbox"/> The variation, if granted, will not alter the essential character of the neighborhood.
Applicant (primary contact)
Name (Print) _____
Address _____ City, State, ZIP _____
Phone _____ Email _____
Interest in Property _____ (e.g. property owner, buyer, developer, lessee, architect, etc...)
Property Owner (if different than applicant)
I hereby designate the applicant to act as my agent for seeking the zoning request(s) described in this application and the associated supporting material.
Name (Print) _____ Signature _____
Address _____ City, State, ZIP _____
Phone _____ Email _____

The applicant is the owner or authorized representative of the owner of the property. The petitioner and the owner of the property grant employees of the Village of Addison permission to enter on the property during reasonable hours for visual inspection of the subject property. I hereby affirm that all information provided herein and, in all materials submitted in association with this application, is true and accurate to the best of my knowledge.

**Applicant Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

Submittal Information
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Submit Online at <https://aglc.addison-il.org/CityViewPortal/Account/Logon>. For more information, visit: [https://www.addisonadvantage.org/government/village\\_departments/planning\\_and\\_zoning.php](https://www.addisonadvantage.org/government/village_departments/planning_and_zoning.php)

<b>To be completed by Village Staff:</b> <input type="checkbox"/> P&Z Commission Final <input type="checkbox"/> VB Final <input type="checkbox"/> Paid, Receipt# _____
Total Fee \$ _____ Cash or Check# _____ P&Z Date: ____ / ____ / ____
Development Name / Address: _____