

REZ



VILLAGE OF WINNETKA, ILLINOIS

DEPARTMENT OF COMMUNITY DEVELOPMENT

REZONING/ZONING MAP AMENDMENT

Property Information

Site Address: _____

Parcel Identification Number(s) (PIN): _____

Applicant Information

Legal Name: _____

Primary Contact: _____

Address: _____

City, State, Zip: _____

Phone No. _____

Email: _____

Date property acquired by applicant: _____

Consultant (or legal counsel) Information

Legal Name: _____

Primary Contact: _____

Address: _____

City, State, Zip: _____

Phone No. _____

Email: _____

Please provide the following information:

1. Proof of ownership (e.g. deed, title policy, certified copy of trustee agreement, etc.);
2. Current plat of survey and legal description;
3. A scaled plan, elevations of proposed building or structures, detailed calculations for gross floor area, intensity of use of lot and height of the proposed buildings or structures, a detailed landscaping plan, an exterior lighting plan and a signage plan, where applicable, are required;
4. Nature of any Restrictions on Property;
5. Explain in detail and/or present information in support of the rezoning request relative to the following:
 - a. Existing uses of property within the general area of the property in question and their relationship to one another;
 - b. The zoning classification of property within the general area of the property in question and their relationship;
 - c. The suitability of the property in question for the uses permitted under the existing zoning classification;
 - d. The trend of development, if any, in the general area of the property in question, including changes, if any, which may have taken place since the day the property in question was placed in its present zoning classification;
 - e. Where applicable, the length of time the property in question has been vacant as zoned; and

- f. That there are changed or changing conditions in the applicable area of the amendment or in the Village generally, that make the proposed amendment reasonably necessary to the promotion of the public health, safety or general welfare.

6. Rezoning/Zoning Map Amendment Application Fee: \$800.00

Applicant Signature: _____

Date: _____

Printed Name: _____