City of Aurora

Development Services Department | Zoning and Planning Division

44 E. Downer Place | Aurora, IL 60505

Phone: (630) 256-3080 | Fax: (630) 256-3089 | Web: www.aurora-il.org



Land Use Petition

Subject Property Information

Address / Location: 316 South Lasalle Street

Parcel Number(s): 15-27-108-005

Petition Request

Requesting to downtown the property at 316 South LaSalle Street from R-4, Two Family Dwelling District to R-3, One Family Dwelling District.

Attachments Required

(a digital file of all documents is also required)

Microsoft Word Copy of: Legal Description* (Format Guidelines 2-1)

PDF Copy of:

Qualifying Statement (Format Guidelines 2-1)

Plat of Survey* (Format Guidelines 2-1)

Letter of Authorization* (Format Guidelines 2-2)

Petition Fee: \$0.00

Payable to: City of Aurora

I hereby affirm that I have full legal capacity to authorize the filing of this Petition and that all information and exhibits herewith submitted are true and correct to the best of my knowledge. The Authorized Signatory invites City representatives to make all reasonable inspections and investigations of the subject property during the period of processing this Petition.

The Subject Property Owner must sign this form unless the Contact Person has been authorized to do so per a letter that is attached hereto. If Signator is NOT the Subject Property Owner a Letter of Authorization with owner's Name and contact information is required.

Authorized Signature:

Print Name and Company:

JAMES M. LARSON - OWNER

I, the undersigned, a Notary Public in and for the said County and State aforesaid do hereby certify that the authorized signer is personally known to me to be the same person whose name is subscribed to the foregoing instrument and that said person signed sealed and delivered the above petition as a free and voluntary act for the uses and purposes set forth.

Given under my hand and notary seal this ______ day of ______

W. Burden

NOTARY PUBLIC SEAL

OFFICIAL SEAL NOTARY PUBLIC, STATE OF ILLINOIS

AU27/1-23.459-RZ



Planning and Zoning Division, 77 S Broadway, Suite 220, Aurora, IL 60505 phone (630) 256-3080 fax (630) 256-3081 email coaplanning@aurora.il.us

Project Contact Information Sheet

Project Number:

Petitioner Company (or Full Name of Petitioner):

Owner						
First Name:	James	Initial:		Last Name:	Larson	Title:
Company Name:						
Job Title:						
Address:	719 4th Ave		la l			
City:	Aurora	State:	<u>IL</u>	Zip:	6050	05
Email Address:	jlarson898@yahoo.com	Phone No.:	630-898-5014	_ Mobile No.:		_
Main Contact (The in	dividual that signed the La	nd Use Petition)				
Relationship to Project:		Owner				
Company Name:						
First Name:	James	Initial:		Last Name:	Larson	Title:
Job Title:						
Address:	719 4th Ave					
City:	Aurora	State:	IL	_Zip:	6050	05
Email Address:	jlarson898@yahoo.com	Phone No.:	630-898-5014	_ Mobile No.:		
Additional Contact #	<u>1</u>					
Relationship to Project:						
Company Name:						
First Name:		Initial:		Last Name:		Title:
Job Title:						
Address:						
City:		State:		Zip:		
Email Address:		Phone No.:		Mobile No.:		_
Additional Contact #	2					
Relationship to Project:						
Company Name:						
First Name:		Initial:	and the last	Last Name:	utan kula taaba	Title:
Job Title:		middi.		Last Harric.		_ mue.
Address:						
City:		State:		_Zip:		-
Email Address:		Phone No.:		Mobile No.:		
Additional Contact #3	2			_ Wobile No		
Relationship to Project:	2					
Company Name:		1-16-1		1 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		
Job Title:		Initial:		Last Name:		Title:
Address:		55 912238 7	W 11 . 1 W N	19 Tour		-
City:		State:	17 2 2 1 1 M	7:	M.L.	
Email Address:		Phone No.:		_Zip:		
		Priorie No		_ Mobile No.:		ta is no rec
Additional Contact #4						
Relationship to Project:						
Company Name:						
First Name:		Initial:		Last Name:		Title:
Job Title:	Sept. While					
Address:						
City:		State:	1	_Zip:		
Email Address:	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Phone No.:		_ Mobile No.:		

