

Land Use Petition

Project Number: 2018.177

Subject Property Information

Address/Location: 625 W. Illinois Avenue
Parcel Number(s): 15-16-328-014; 15-16-328-017

Petition Request(s)

Requesting approval of a Plat of Easement for City Watermain Easement on the property located 625

Attachments Required

(a CD of digital files of all documents are also required)

Development Tables Excel Worksheet - digital only (1-0)

One Paper and pdf Copy of: Plat of Easementn (2-13)

One Paper and pdf Copy of: Letter of Authorization* (2-2)



Petition Fee: \$200.00 (Payable to The 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 Aurhorization with owner's Name and contact information is required.

Authorized Signature: *Adam Jordan* Date 2-20-19

Print Name and Company: Adam Jordan, VP, Business Manager Butterfield Color/Sika Corporation

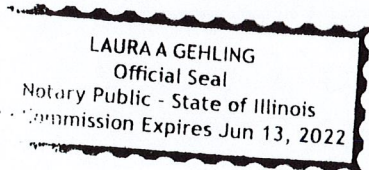
I, the undersigned, a Notary Public in and for the said County and State aforesaid do hereby certify that the authorized signer is personally known to me to be the same person whose name is subscribed to the foregoing instrument and that said person signed sealed and delivered the above petition as a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

Given under my hand and notary seal this 20th day of February.

State of IL)
County of Kane) SS

NOTARY PUBLIC SEAL

Laura A. Gehling
Notary Signature



Filing Fee Worksheet

Project Number: 2018.177

Petitioner: Butterfield Colors

Number of Acres: 0.00

Number of Street Frontages: 0.00

Non-Profit No

Linear Feet of New Roadway: 0

New Acres Subdivided (if applicable): 0.00

Area of site disturbance (acres): 0.00

Filing Fees Due at Land Use Petition:

Request(s):	Dedications	\$	200.00
		\$	-

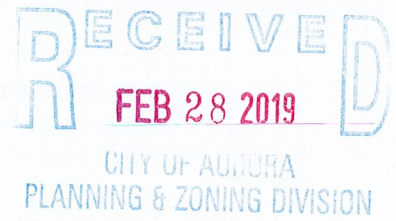
Total: **\$200.00**

This Calculator is for informational purposes only and all numbers are subject to verification by the Review Planner.

Verified By:

Date:

RECEIVED
FEB 28 2019
CITY OF AURORA
PLANNING & ZONING DIVISION



Contact Information Data Entry Worksheet

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Fill in all the GREEN Boxes - if Not Applicable Please Leave Blank

Data Entry Fields are indicated in Green

Owner

First Name:	Sika Corporation	Initial:		Last Name:		Title:	
Address:	201 Polito Ave.						
City:	Lyndhurst	State:	NJ	Zip:	7071		
Email Address:		Phone No.:		Mobile No.:			
Company Name:	Sika Corporation						
Job Title:							

Main Petitioner Contact (The individual that will Sign the Land Use Petition)

Relationship to Project	Owner						
First Name:	Adam	Initial:		Last Name:	Jordan	Title:	Mr.
Address:	625 West Illinois Ave.						
City:	Aurora	State:	IL	Zip:	60506		
Email Address:	jordan.adam@us.sika.com	Phone No.:	630-723-3118	Mobile No.:	740-466-2648		
Company Name:	Sika Corporation						
Job Title:	VP, Business Mgr. Butterfield Color						

Additional Contact #1

Relationship to Project	Other						
First Name:	Greg	Initial:		Last Name:	Weisbrock	Title:	Mr.
Address:	175 Benchmark Ind. Dr.						
City:	Streator	State:	IL	Zip:	61364		
Email Address:	gwiesbrock@vissering.com	Phone No.:	815-673-5511	Mobile No.:	815-257-5519		
Company Name:							
Job Title:							

Additional Contact #2

Relationship to Project	Surveyor						
First Name:	Kevin	Initial:		Last Name:	Lewis	Title:	Mr.
Address:	300 Marquardt Drive						
City:	Wheeling	State:	IL	Zip:	60090		
Email Address:	kevin@igconsulting.net	Phone No.:	847-215-1133	Mobile No.:	847-561-9421		
Company Name:	IG Consulting, Inc.						
Job Title:	President						

Additional Contact #3

Relationship to Project	Select One From List						
First Name:		Initial:		Last Name:		Title:	Select One From List
Address:							
City:		State:		Zip:			
Email Address:		Phone No.:		Mobile No.:			
Company Name:							
Job Title:							

Additional Contact #4

Relationship to Project	Select One From List						
First Name:		Initial:		Last Name:		Title:	Select One From List
Address:							
City:		State:		Zip:			
Email Address:		Phone No.:		Mobile No.:			
Company Name:							
Job Title:							