

Planning and Zoning Division 44 E. Downer Place, Aurora, IL 60507-2067 phone (630)256-3080 fax (630)-256-3089 email COAPlanning@aurora-il.org

Land Use Petition	Project Number: 2018.188
Subject Property Information  Address/Location: north of I-88, east of the centerline of Deerpath  Parcel Number(s): 14-01-400-016  Petition Request(s)	CITY OF AURURA PLANNING & ZONING DIVISION
Requesting approval of a Plat of Easement for Road Maintenance a centerline of Deerpath Road	Ind Utility Easement located north of I-88, east of the
Attachments Required (a CD of di Development Tables Excel Worksheet - digital only (1-0)	gital files of all documents are also required) One Paper and pdf Copy of: Plat of Easement (2-13)
One Paper and pdf Copy of: Contact Worksheet (1-5) Filing Fee Worksheet (1-6) Letter of Authorization* (2-2)	Recording Fee of: \$TBD - in a check made out to KANE COUNTY  This instrument is executed by the undersigned Land Trustee, not personally but solely as Trustee in the exercise of the power and authority conferred upon and vested in it as such Trustee. It is expressly understood and agreed that all the varranties, indemnities, representations, covenants, undertakings and agreements herein made on the part of the Trustee are undertaken by it solely in its capacity as Trustee and not personally. No personal liability or personal responsibility is assumed by or shall at any time be asserted or enforceable against the Trustee on account of any warranty, indemnity,
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 Peti	representation, covenant, undertaking or agreement of the Trustee in this instrument.
submitted are true and correct to the best of my knowledge. The Authorized reasonable inspections and investigations of the subject property during the *The Subject Property Owner must sign this form unless the Contact Person hereto. If Signator is NOT the Subject Property Owner a Letter of Aurhorization	Signatory invites City representatives to make all period of processing this Petition.  has been authorized to do so per a letter that is attached
Authorized Signature: Jandia Tussell, AVP	Date 11/5/18 CORPORATE
Print Name and Company: Chicago Title Land Trus dated December 30, 1999  I, the undersigned, a Notary Public in and for the said County and State afore personally known to me to be the same person whose name is subscribed to sealed and delivered the above petition as a free and voluntary act for the use	the foregoing instrument and that said person signed
Given under my hand and notary seal this 574 day of Aovemb	h
State of <u>Clarks</u> ) SS  County of <u>Carks</u> ) SS  Notary Signature CHRISTINE C. YOUNG Notary Public, State of Illinois	
My Commission Expires 06/21/19	)



# Planning and Zoning Division 1 S. Broadway, 2nd Floor, Aurora, IL phone (630) 256-3080 fax (630) 256-3081 email COAPlanning@aurora-il.org



## Filing Fee Worksheet

Project Number: 2018.188

Linear Feet of New Roadway:

0

Petitioner: Chicago Title Land Trust Company

New Acres Subdivided (if applicable): 0.00

Acres Subdivided (if applicable): 0.00

Area of site disturbance (acres): 0.00

Number of Acres: 0.00

Number of Street Frontages: 0.00

Non-Profit No

Filling Fees Due at Land		
Request(s): De	dications	\$ 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:

Tracey M. Vacek

Date:

10/2/2018





### **Project Contact Information Sheet**

Project Number:

2018.188

### Petitioner Company (or Full Name of Petitioner):

CITY OF AUHURA

PLANNING & ZONING DIVISION

<u>Owner</u>							
First Name:	Sandra	Initial:		Last Name:	Russell	Title:	Ms.
Company Name:	Chicago Title Land Trust Cor	mpany				-	
Job Title:						_	
Address:	10 S. LaSalle Street, Suite 2	750				_	
City:	Chicago	State:	IL	_Zip:	60603	1	_
Email Address:	sandra.russell@ctt.com	Phone No.:	312-223-3453	Mobile No.:			
Main Contact (The in	ndividual that signed the L	and Use Petition)					
Relationship to Project:		Owner					
Company Name:	Chicago Title Land Trust Cor	mpany					
First Name:	Sandra	Initial:		Last Name:	Russell	Title:	Ms.
Job Title:						_	
Address:	10 S. LaSalle Street, Suite 27	750				-	
City:	Chicago	State:	IL	Zip:	60603	_	
Email Address:	sandra.russell@ctt.com	Phone No.:	312-223-3453	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:		Last Name:		Title:	
Job Title:				Last Harris.		. 1160.	-
Address:						•	
City:		State:		Zip:			
Email Address:		Phone No.:		Mobile No.:		5	
Additional Contact #							
Relationship to Project:	-						
Company Name:							
First Name:		Initial:		Last Name:		Title:	
Job Title:		miliai.		Last Name.		riue.	
Address:							
City:		State:		Zip:			
Email Address:		Phone No.:		Mobile No.:			
Additional Contact #	4						
Relationship to Project:	<u>-</u>						
Company Name:							
First Name:		Initial:		Last Name:		Title:	
Job Title:				Lust Haine.		ille.	
Address:							
City:		State:		Zip:			
Email Address		— Phone No :		Mobile No			