

Land Use Petition

Project Number: 2021.077

Subject Property Information

Address/Location: 810 N. Farnsworth Avenue

Parcel Number(s): 15-14-427-023

Petition Request(s)

Requesting a Plat of Easement for a city easement, a stormwater control easement and a cross-access easement located at 810 N. Farnsworth Avenue

Attachments Required

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

Digital Copy of:

Word Document of: Legal Description
(Format Guidelines 2-1)

One Paper and PDF Copy of:

Plat of Survey (Format Guidelines 2-1)
Legal Description (Format Guidelines 2-1)
Letter of Authorization (Format Guidelines 2-2)

One Paper and PDF Copy of:

Plat of Dedication (2-13)

Executed Mylar Copy of: Plat of Dedication (2-13)

Recording Fee of: \$TBD - in a check made out to KANE COUNTY RECORDER

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 Authorization with owner's Name and contact information is required.

Authorized Signature: _____ Date: _____

Print Name and Company: _____

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 _____.

State of _____)

NOTARY PUBLIC SEAL

County of _____)

Notary Signature

Land Use Petition

Project Number: 2016.217

Subject Property Information

Address/Location: 810 N. Farnsworth Avenue / Farnsworth Avenue between Sheffer Road and Mountain Street

Parcel Number(s): 15-14-427-023

Petition Request(s)

Requesting a Staff Review for 810 N. Farnsworth Avenue being a property located on Farnsworth Avenue between Sheffer Road and Mountain Street for a Health and human services (6300) Use

Attachments Required

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

Word Document of: Legal Description (2-1)	Two Paper and One pdf Copy of: Fire Access Plan (2-6)	One Paper and pdf Copy of: Final Plan (2-4)
One Paper and pdf Copy of: Executed Land Use Petition (1-3)	<u>Plat of Easement for stormwater control, city easements, and cross access easement</u>	Landscape Plan (2-7)
Qualifying Statement (2-1)	Final Engineering Plans (2-16)	Building and Signage Elevations (2-11)
Plat of Survey (2-1)	Stormwater Permit Application (App 6-5)	
Legal Description (2-1)	Stormwater Report (2-10)	
Letter of Authorization* (2-2)	Wetland Determination Report / Letter by Design Professional	
Contact Worksheet (1-5)		
Filing Fee Worksheet (1-6)		
Land Cash Worksheet (1-7)		
Parking Worksheet (1-8)		
Landscape Requirement Worksheet (1-22)		
Landscape Materials Worksheet (1-23)		

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 Authorization with owner's Name and contact information is required.

Authorized Signature: Chad Middelort Date 11/2/17

Print Name and Company: Chad Middelort as MANAGER of MERCYLANE LLC

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.

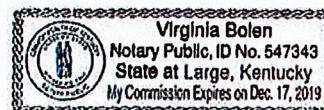
Given under my hand and notary seal this 12TH day of JANUARY 2017

State of Kentucky)

NOTARY PUBLIC SEAL

County of Jefferson) SS

Virginia Bolen
Notary Signature



Project Contact Information Sheet

Project Number: 2016.217

Owner

First Name: Chad Initial: _____ Last Name: Middendorf Title: _____
Company Name: Mercy Lane, LLC
Job Title: Managing Member
Address: 10531 Timberwood Circle, Suite D
City: Louisville State: KY Zip: 40233
Email Address: chad@greenrockusa.com Phone No.: 502-425-1524 Mobile No.: _____

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

Relationship to Project: _____ Engineer
Company Name: Larson Engineering, Inc.
First Name: Michael Initial: A Last Name: Murphy Title: Mr.
Job Title: Department Manager
Address: 1001 Office Park Road, Suite 214
City: West Des Moines State: IA Zip: 50,265.00
Email Address: mmurphy@larsonengr.com Phone No.: 515-225-4377 Mobile No.: 515-302-3216

Additional Contact #1

Relationship to Project: _____ Engineer
Company Name: Automated Engineering Technology
First Name: _____ Initial: _____ Last Name: _____ Title: _____
Job Title: _____
Address: 12358 Hossier Road
City: Fishers State: IN Zip: 46,037.00
Email Address: _____ Phone No.: _____ Mobile No.: _____

Additional Contact #2

Relationship to Project: _____ Engineer
Company Name: Watermark Engineering Resources
First Name: _____ Initial: _____ Last Name: _____ Title: _____
Job Title: _____
Address: 2631 Ginger Woods Parkway, Suite 100
City: Aurora State: IL Zip: 60,502.00
Email Address: _____ Phone No.: _____ Mobile No.: _____

Additional Contact #3

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 #4

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