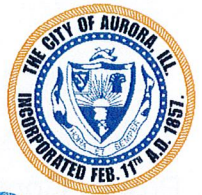


City of Aurora

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

RECEIVED
OCT - 6 2021

21.298

CITY OF AURORA
PLANNING & ZONING DIVISION

Subject Property Information

Address / Location: 921 North Russell Avenue

Parcel Number(s): 15-16-177-011, 15-16-177-013

Petition Request

Requesting approval of a Plat of Easement for the property located at 921 North Russell Avenue.

Attachments Required

One Paper and PDF Copy of:

Letter of Authorization (Format Guidelines 2-2)

(a digital file of all documents is also required)

Two Paper and PDF Copy of:

Plat of Dedication (2-13)

One Executed Mylar Copy of:

Plat of Dedication (2-13)

Recording Fee of:

\$90.00 - in a check made out to KANE
COUNTY RECORDER

Petition Fee: \$200

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: [Signature]

Date 10/6/21

Print Name and Company: John Chiampas JHTVB Realty 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.

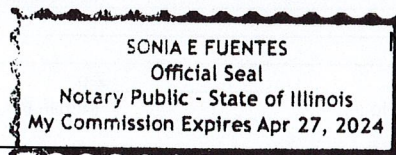
Given under my hand and notary seal this 6th day of October, 2021.

State of ILLINOIS)

) SS

County of KANE)

Notary Signature [Signature]



NOTARY PUBLIC SEAL

Filing Fee Worksheet

Project Number: 0

Petitioner: PolyUSA

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: Steve Broadwell

Date:

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CITY OF AURORA
PLANNING & ZONING DIVISION

Project Contact Information Sheet

Project Number:

Petitioner Company (or Full Name of Petitioner):

PolyUSA

Owner

First Name: Sohn Initial: Chiang Last Name: _____ Title: _____
Company Name: JHTVB Realty, LLC
Job Title: _____
Address: 841 N Russell Ave
City: Aurora State: IL Zip: 60506
Email Address: john@polyusa-inc.com Phone No.: _____ Mobile No.: _____

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

Relationship to Project: Owner Engineer
Company Name: Transystems Poly USA, Inc.
First Name: Chaz Sohn Initial: _____ Last Name: Gross Chiang Title: _____
Job Title: _____
Address: 2400 Pershing Rd, Ste. 400 711 New Haven Ave.
City: Kansas City Aurora State: MO IL Zip: 64108 60506
Email Address: cgross@transystems.com Phone No.: 630-542-5143 Mobile No.: _____

Additional Contact #1

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: _____
Address: _____
City: _____ State: _____ Zip: _____
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.: _____