

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: 2018.040

**Subject Property Information** 

Address/Location: 213 Mettel Road Parcel Number(s): 15-10-126-002

Petition Request(s)

Requesting approval of a Plat of Easement for City Easement located at 213 Mettel Road

APR 10 2018

CITY UF AURURA
PLANNING & ZONING DIVISION

**Attachments Required** 

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

One Paper and PDF Copy of: Letter of Authorization (2-2) (a CD of digital files of all documents are also required)

One Paper and PDF Copy of: Plat of Dedication (2-13)
Executed Mylar Copy of: Plat of Dedication (2-13)

Recording Fee of: \$90.00 - in a check made out to KANE COUNTY

## Petition Fee: \$200.00 (Payable to The City of Aurora)

hereby affirm that I have full legal capacity to authorize the filing of this Petition and that all information and exhibits here	ewith
submitted are true and correct to the best of my knowledge. The Authorized Signatory invites City representatives to male	\C 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	at is attached
nereto. If Signator is NOT the Subject Property Owner a Letter of Aurhorization with owner's Name and contact information	on is required.
Authorized Signature: DateDate	
Print Name and Company: John Savage, Heartland Recycling - Amora CCOD, LL	<i>(</i> .
Print Name and Company: John Savage, Heartland Recycling - Aurora Colon, Dec	_

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 30<sup>th</sup> day of March

State of T//no/S

NOTARY PUBLIC SEAL

Notary Signature

OFFICIAL SEAL JOSEPH A VOLINI NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:10/22/18

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1-6

## Filing Fee Worksheet

Project Number: 2018.040

Petitioner: Heartland Recycling

Number of Acres: 49.84

Number of Street Frontages: 2.00

Non-Profit No

Linear Feet of New Roadway:

0

New Acres Subdivided (if applicable): 0.00

Area of site disturbance (acres): 0.00

Filling Fees Due at Land Use Petition:

| rees due at Land Ose Petition. |              |
|--------------------------------|--------------|
| Request(s): Dedications        | \$<br>200.00 |
|                                | \$<br>-      |
|                                | \$<br>_      |
|                                | \$<br>       |
|                                | \$<br>-      |
|                                | \$<br>-      |

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:

APR 10 2018

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DECEIVE



## Project Contact Information Sheet

| Pro | iect | Number | : |
|-----|------|--------|---|
|     |      |        |   |

2018.040

| Petitioner Company (or Full Name of Petitions | r): |
|-----------------------------------------------|-----|
|-----------------------------------------------|-----|

Heartland Recycling

CITY OF AURORA
PLANNING & ZONING DIVISION

| <u>Owner</u>          |                                 |                   |              | PLAININING    | d COMMAN D | IAIOIOIA |     |
|-----------------------|---------------------------------|-------------------|--------------|---------------|------------|----------|-----|
| First Name:           | Joe                             | Initial:          |              | Last Name:    | Volini     | Title:   | Mr. |
| Company Name:         | Heartland Recycling-Aurora C    | CDD LLC           |              |               |            |          |     |
| Job Title:            |                                 |                   |              |               |            |          |     |
| Address:              | 213 Mettel Rd                   |                   |              |               |            |          |     |
| City:                 | Aurora                          | State:            | <u>IL</u>    | _Zip:         |            | 60505    |     |
| Email Address:        | Joesphvolini@gmail.com          | Phone No.:        | 630-391-0022 | _ Mobile No.: |            |          |     |
| Main Contact (The     | e individual that signed the La | and Use Petition) |              |               |            |          |     |
| Relationship to Proje |                                 | Owner             |              |               |            |          |     |
| ompany Name:          | Heartland Recycling-Aurora C    | CDD LLC           |              |               |            |          |     |
| irst Name:            | Joe                             | Initial:          |              | Last Name:    | Volini     | Title:   | Mr. |
| ob Title:             |                                 |                   |              |               |            |          |     |
| ddress:               | 213 Mettel Rd                   |                   |              |               |            |          |     |
| ity:                  | Aurora                          | State:            | <u>IL</u>    | _Zip:         |            | 60505    |     |
| mail Address:         | Joesphvolini@gmail.com          | Phone No.:        | 630-391-0022 | _ Mobile No.: |            |          |     |
| dditional Contac      | ct #1                           |                   |              |               |            |          |     |
| Relationship to Proje |                                 | Surveyor          |              |               |            |          |     |
| Company Name:         | Todd Surveying                  |                   |              |               |            |          |     |
| irst Name:            | Eric                            | Initial:          | C.           | Last Name:    | Pokorny    | Title:   | Mr. |
| ob Title:             | President & Professional Surv   | veyor             |              |               |            |          |     |
| ddress:               | 759 John St., Ste. D.           |                   |              |               |            |          |     |
| ity:                  | Yorkville                       | State:            | IL           | _Zip:         |            | 60560    |     |
| mail Address:         | eric@toddsurvey.com             | Phone No.:        | 630-892-1309 | _ Mobile No.: |            |          |     |
| dditional Contac      | ct #2                           |                   |              |               |            |          |     |
| elationship to Proje  |                                 | Engineer          |              |               |            |          |     |
| Company Name:         | Tebrugge Engineering            |                   |              |               |            |          |     |
| irst Name:            | John                            | Initial:          |              | Last Name:    | Tebrugge   | Title:   | Mr. |
| ob Title:             |                                 |                   |              |               |            |          |     |
| ddress:               | 410 E. Church St.               |                   |              |               |            |          |     |
| City:                 | Sandwich                        | State:            | IL           | Zip:          |            | 60548    |     |
| mail Address:         | info@tebruggeengineering.co     | om Phone No.:     | 815-786-0195 | Mobile No.:   |            |          |     |
| Additional Conta      | ct #3                           |                   |              |               |            |          |     |
| Relationship to Proj  |                                 |                   |              |               |            |          |     |
| Company Name:         |                                 |                   |              |               |            |          |     |
| First Name:           |                                 | Initial:          |              | Last Name:    |            | Title:   |     |
| ob Title:             |                                 |                   |              |               |            |          |     |
| ddress:               |                                 |                   |              |               |            |          |     |
| City:                 |                                 | State:            |              | Zip:          |            |          |     |
| Email Address:        |                                 | Phone No.:        |              | Mobile No.:   |            |          |     |
|                       | ot #4                           |                   |              |               |            |          |     |
| Additional Conta      |                                 |                   |              |               |            |          |     |
| Relationship to Proj  | ect.                            |                   |              |               |            |          |     |
| Company Name:         |                                 | Initial:          |              | Last Name:    |            | Title:   |     |
| irst Name:            |                                 | IIIIIai.          |              | Last Haine.   |            |          |     |
| lob Title:            |                                 |                   |              |               |            |          |     |
| Address:              |                                 | State:            |              | Zip:          |            |          |     |
| City:                 |                                 | Phone No.:        |              | Mobile No.:   | -          |          |     |
| Email Address:        |                                 | PHONE NO          |              | 14100116 140  |            |          |     |