

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: 2020.199

Subject Property Information

Address/Location: 39W379 Prarie Street

Parcel Number(s): <u>14-25-100-002</u>

Petition Request(s)

Requesting the Annexation of 0.7969 acres located at 39 W 779 Prairie Street



Attachments Required

One Paper Copy of: Executed Water Service Agreement (1-9) Plat of Survey (2-1)

Filing Fee of: \$750.00

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

One Paper and pdf Copy of:

Annexation Plat (2-3)

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

Petition Fee: \$750.00 (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.

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 315 day of March 202

277 LIA (015)

NOTARY PUBLIC SEAL

OFFICIAL SEAL
JASMINE E COTTS
NOTARY PUBLIC - STATE OF ILLINOIS
MY COMMISSION EXPIRES:03/02/22

I NO DAKE



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: 0

Petitioner: Fernando & Maira Espejel

Linear Feet of New Roadway: New Acres Subdivided (if applicable): 0.00

0

Number of Acres: 0.80

Number of Street Frontages: 1.00

Non-Profit 0

Area of site disturbance (acres): 0.00

Filling Fees Due at Land Use Petition:

Request(s): Annexation \$ 750.00 \$

> \$750.00 Total:

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

Verified By:

Jacob Sodaro

Date:

3/18/2021

MAR 31 2021

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

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First Name:	Fernando	Initial:		Last Name:	Espejel	Title:	Mr.
Address:	39W379 Prairie St						
City:	Aurora	State:	II	Zip:	60506		
Email Address:	espejelfernando@gmail.com	Phone No.:	7738142613	Mobile No.:	7738142613		
Company Name:							
Job Title:							

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

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 #1

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 #2

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

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:				