

**APPLICATION FOR VARIANCE**

City of Zion, Illinois  
Zoning Board of Appeals

**Fees - Fees must accompany application when submitted and is non-refundable.**

City - \$550 plus \$15 per acre or any portion thereof plus,  
Township- \$55 plus \$6 per acre or any portion thereof, plus,  
Postage- \*\*See below  
Professional- \$40 per hour Professional; \$25 per hour for technical services if needed.  
Consultants – Same rate as charged to City. Due upon invoice by City.

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Date: \_\_\_\_\_ Application No.: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Address of Applicant: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Property Interest of Applicant: \_\_\_\_\_

(Feeowner, Contract Purchaser, etc.)

Is purchase contingent on a variance to the Zoning Ordinance? Yes \_\_\_\_\_ No \_\_\_\_\_

Date interest acquired: \_\_\_\_\_ Owned Property since: \_\_\_\_\_

Name of Owner (if other than applicant): \_\_\_\_\_

Address of Owner: \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Phone \_\_\_\_\_

PIN: \_\_\_\_\_

Acreage/Sq. Ft. \_\_\_\_\_

Address of Property: \_\_\_\_\_

Legal Description (Attach of necessary): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\*\*\*\*\*

**DO NOT WRITE IN THIS SPACE – FOR OFFICE USE ONLY**

Date filed: \_\_\_\_\_ Received by: \_\_\_\_\_

Date set for hearing: \_\_\_\_\_ Date(s) hearing held: \_\_\_\_\_

Published notice on \_\_\_\_\_ in \_\_\_\_\_.

Date notices mailed to owners in vicinity: \_\_\_\_\_

Date fee paid: \_\_\_\_\_ Amount: \_\_\_\_\_ Receipt No. \_\_\_\_\_

Date Township Paid: \_\_\_\_\_ Amount: \_\_\_\_\_ Receipt No. \_\_\_\_\_

Comments:

Reference Section of the Zoning Ordinance from which a variance is requested: Section 102- \_\_\_\_\_

Present use of Property: \_\_\_\_\_  
(Vacant, multi-family, type of business, etc.)

Does the present building (if any) meet the City Building Codes for the proposed use? YES \_\_\_ No \_\_\_

Present Zoning of property \_\_\_\_\_

State purpose of the variance: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Show the location of the subject property on a property map. Such maps are available from the Zion Township Assessor. Attach a plot plan showing the proposed redevelopment or development of the property. Show all dimensions.

PERSONS INVOLVED IN THIS ZONE CHANGE

Attorney: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Engineer/Architect/Planner \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

Engineer/Architect/Planner \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip \_\_\_\_\_ Phone: \_\_\_\_\_

I/We certify that all statements and representations contained in any papers or plans submitted herewith or heretofore are true and correct to the best of my/our knowledge and belief.

I/we agree \_\_\_\_\_ / disagree \_\_\_\_\_ to the use of a consultant.

\*\*Applicant is responsible for reimbursement of all costs related to mailed notifications of hearing to interested parties and property owners of all property within 250 feet in each direction prior to the hearing. A copy of all addresses shall be provided to the applicant in a timely manner.

\_\_\_\_\_  
Printed Name of Applicant

\_\_\_\_\_  
Printed Name of Owner

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date