



Planning and Zoning Application

Application Request(s)

Check all that apply.

- | | | |
|--|--|---|
| <input type="checkbox"/> Concept Plan | <input type="checkbox"/> Variation | <input type="checkbox"/> Special Use Permit |
| <input type="checkbox"/> Rezoning | <input type="checkbox"/> Annexation | <input type="checkbox"/> PUD - Special Use Permit |
| <input type="checkbox"/> Preliminary Plat of Subdivision | <input type="checkbox"/> Final Plat of Subdivision | <input type="checkbox"/> Final Site Plan |
| <input type="checkbox"/> Amendment to Checked Item(s) | | |

The undersigned applicant(s) request(s) the corporate authorities of the Village of Channahon to approve the following application for above checked item(s) in the Village of Channahon and in support of said application, state(s) as follows:

Property & Request Information

Address of Request

Project Name

PIN

General Location

Property Size

Present Zoning

Proposed Zoning

Present Land Use

Proposed Land Use

Reason for Request/Description of Request:

Building Permit Submitted? Yes No If yes, for what? _____

Complete the following Development information if applicable:

Type of Development: Residential Commercial Industrial Institutional

Number of Units/Lots (if applicable)

Buildings/Improvements on Property to Remain or be Removed? (describe):

Floodplain areas present on property? Yes No Unsure

Professional Fee Agreement submitted? Yes No N/A

Applicant Information

Applicant/Developer:

Owner Contract Purchaser Lessee Agent for

Primary Contact

Business Name

Address (City, State, Zip)

Email

Phone

Fax

Property Owner (if different than applicant):

Name

Address (City, State, Zip)

Email

Phone

Fax

Project Team

Attorney:

Name

Company

Address (City, State, Zip)

Email

Phone

Fax

Engineer:

Name

Company

Address (City, State, Zip)

Email

Phone

Fax

Planning/Landscape Architect Consultant:

Name

Company

Address (City, State, Zip)

Email

Phone

Fax

Project Team (continued)

Architect:

Name	Company
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Address (City, State, Zip)

Email

Phone	Fax
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Submitted Materials Required

- Legal Description of Property (hard copy)
 - Legal Description of Property (emailed to smcmaster@channahon.org)
 - Disclosure of Beneficiaries Form - completed, original
 - Fee(s), Non-Refundable
(all that apply)
 - Concept Plan: No charge
 - Variation, Single Lot Residential: \$200
 - Variation, Non-Residential + Multiple Lot Residential: \$625
 - Special Use Permit: \$625
 - Rezoning: \$625
 - Annexation/Agreement: No charge
 - PUD - Special Use Permit: \$1250
 - Preliminary Plat:
 - 5 acres or less = \$475
 - Over 5 acres, less than 10 = \$700
 - Over 10 acres, less than 20 = \$950
 - Over 20 acres = \$1250
 - Final Plat: \$500 + \$25 per lot over 10 lots
 - Final Site Plan: \$500 + \$25 per lot over 10 lots

Amendment request(s) fees are the same as above listed fees.
 - Variance, Special Use Permit, and/or PUD Supplement(s)
 - Plat of Survey, to Scale and Current
 - For Variation(s): Marked up Plat of Survey illustrating requested variation(s)
 - Any specific information, which may help in the review and approval process
- Applicable for New Development and/or Use:*
- 4 full-size, folded, collated copies of all applicable plans including but not limited to the following:
Site Plan with Complete Site Data, Preliminary/Final Plats, Architectural Elevations (Color and Black-Line)
including Signs, Photometric Plan with Lighting Specifications, Tree Survey, Landscape Plan
 - 1 copy of proposed covenants and restrictions
 - Detailed description of business, proposed hours of operation, number of employees

Applicant Signatures

The undersigned below hereby certifies that he/she is the owner of the described property and has authorized an agent, which both agree to abide by all Ordinances, regulations, and codes of the Village of Channahon as are in full force and effect on the date of the consideration of this application by the Corporate Authorities. The owner or applicant(s) also agree(s) to pay any and all fees, costs, and expenses of the Village of Channahon, including professional fees that are necessary and required to act on this application.

Project Address

Owner's Name (print)

Applicant's Name (print) *If different than owner*

Owner's Signature

Applicant's Signature

Date

Date

Staff Use Only

Applicable Code Sections

Comprehensive Plan

Zoning: N- _____ S- _____ E- _____ W- _____

Sub Area

Professional Fee ID

Submittal Date

Received By

Payment Type

Check #

Fees Paid

