



Case No.: _____

Fee(s): _____

Date Paid: _____

ZONING APPLICATION
ALL FEES ARE NON-REFUNDABLE

APPLICATION TYPE *(Check all that apply):*

Zoning Permit

Zoning Amendment

Special Use Permit

Variation

Applicants must complete application and attach all necessary documents

PROPERTY LOCATION

Address: _____

Tax Identification: _____ Present Zoning of Property: _____
00-00-000-000

APPLICANT'S INFORMATION

Full Name(s): _____

Address: _____

Day Phone No.: _____ Evening Phone No.: _____

Relationship to Property Owner: _____ Email: _____

OWNER'S INFORMATION *(If different from above)*

Full Name(s): _____

Address: _____

Day Phone No.: _____ Evening Phone No.: _____

Email: _____

CONTRACTOR INFORMATION *(if applicable)*

Full Name: _____

Address: _____

Phone No.: _____ Email: _____

PROJECT INFORMATION

Description of project: _____

PROJECT INFORMATION *continued*

Estimated starting date: _____ Estimated Cost: _____

Size of New Structure: L _____ft x W _____ft x H _____ft Property Lot Size: L _____ft x W _____ft

Please submit a site plan of the property. Site plans must have a maximum size, folded or unfolded, of 8½ x 11 and must show the following:

- ___ 1. Dimensions of property
- ___ 2. Location and dimensions of all buildings on property, including accessory structures such as detached garages and storage sheds and attachments such as porches, decks and patios with pertinent setback lines.
- ___ 3. Traffic circulation pattern (arrows illustrating direction of traffic flow)
- ___ 4. Points of ingress and egress for the proposed development
- ___ 5. Estimated traffic generation of the proposed development
- ___ 6. Parking plan illustrating internal circulation of the proposed development including:
 - a. Number and location of required and provided parking spaces, including handicapped parking spaces
 - b. Parking spaces and aisles with dimensions indicated
 - c. Loading areas
- ___ 7. Sign plan for all activity
- ___ 8. Landscaping, screening and buffering plans illustrating specific treatment for screening adjacent residential areas from undesirable impacts for the activity on the proposed site, including:
 - a. Location and screening for exterior mechanical equipment
 - b. Locations and dimension of yards and transitional buffer yards
- ___ 9. Exterior lighting plan illustrating the location of all illuminating fixtures
- ___ 10. Distance from property lines to existing and proposed structures. For accessory structures include distance from the accessory structure and any other structure.
- ___ 11. Proposed water and sewer supply systems
- ___ 12. Easements – location, width and purpose
- ___ 13. North arrow

Present land use of property: _____ **Present Zoning:** _____

Present zoning of surrounding properties:

North: _____ South: _____ East: _____ West: _____

Proposed land use of property: _____ **Proposed Zoning:** _____

Legal Description of Property (*may attach*): _____

PROJECT INFORMATION *continued*

1. From what section(s) of the Zoning Ordinance for the City of West Peoria, Illinois, as amended to date, is a zoning amendment, special use permit or variation sought:

2. Reason for requesting this zoning amendment, special use permit or variation at this location:

3. This proposed zoning amendment, special use permit or variation will not adversely affect the surrounding area because:

4. Owners of property adjacent to the property:

Name

Address

_____	_____
_____	_____
_____	_____
_____	_____

Please submit the following items with this application:

1. A plat of the property.
2. A site plan of the property.
3. The legal description, with lines and boundaries of the property.
4. The appropriate fee.

I/We, the undersigned, hereby request that the City Council of the City of West Peoria grant a Zoning Amendment, Special Use Permit, or Variation as provided by The Zoning Ordinance for the City of West Peoria, Illinois, as amended to date.

Signature: _____ Printed Name: _____

Signature: _____ Printed Name: _____

Dated this _____ day of _____, 202__.

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**PLEASE NOTE THAT THIS APPLICATION WILL NOT BE ACCEPTED
UNLESS ALL REQUIRED INFORMATION IS COMPLETED
FAILURE TO FILL THIS APPLICATION OUT COMPLETELY WILL DELAY THE REVIEW PROCESS**

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FOR OFFICE USE ONLY – DO NOT WRITE BELOW THIS LINE

Received by: _____ Date _____

Fee Collected: \$ _____ Cash: _____ Check: _____ Credit: _____

PERMIT APPROVED: Yes No

City Administrator Signature

Comments: _____

Copy: _____ New Build/Addition – WP Fire Marshall + plans _____ Driveway – Public Works Manager

CONSENTS FOR ZONING AMENDMENT, SPECIAL USE PERMIT OR VARIATION (Optional)

I/We, the undersigned, being owners of property adjacent to the property under consideration for a Zoning Amendment, Special Use Permit or Variation have no objection to the amendment, permit or variation being requested.

ADJACENT PROPERTY OWNERS

Signature

Print Name

Address

I/We attest that the above signatures, names, and addresses are true and correct and represent some/all (circle one) of the owners of property adjacent to the subject property as defined by The Zoning Ordinance for the City of West Peoria, Illinois, as amended to date.

Signature: _____ Printed Name: _____

Signature: _____ Printed Name: _____

Dated this _____ day of _____, 202__.

State of Illinois

County of _____

Signed and sworn (or affirmed) to before me on: _____, 202__.

_____ by _____
Applicant/Property Owner Printed Name Notary Printed Name

Notary Public Signature