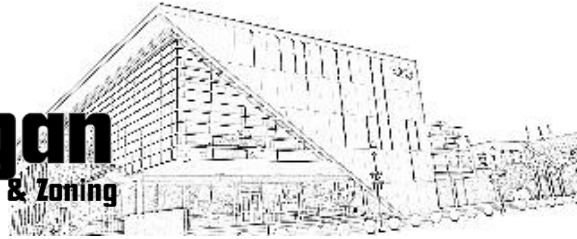




**City of**  
**Waukegan**  
**Department of Planning & Zoning**  
(847) 625-6878



## CONSOLIDATION APPLICATION

**Application is hereby made by:**

Full Name of Petitioner:

Full Name of Property Owner:

Street Address:

Street Address:

City, State and Zip:

City, State and Zip:

Phone Number with Area Code:

Phone Number with Area Code:

E-mail Address:

E-mail Address:

---

**Property Information**

Street Address or nearest intersection:

FULL legal description of property (MUST BE TYPED HERE. CANNOT BE ATTACHED):

Lake County Parcel Identification Number(s) (PIN)(List all):

Full name of proposed consolidation:

Preliminary Plat

Final Plat

Both Preliminary and Final Plat (must be approved beforehand by staff)

# CONSOLIDATION APPLICATION

## Zoning and Use Information

1. **Zoning of the property:**
2. **Proposed use of the property that warrants this application for a consolidation:**
3. **If the proposed consolidation is approved, what improvements or construction is planned?** (An accurate site plan is required to establish that the proposed improvements can meet the minimum zoning and subdivision requirements)

4. **Size of Consolidation:**                      Square Feet                      Acres

5. **What is the estimated value of buildings and/or residences proposed?**

6. **Proposed/Existing Utilities and Location:**

Water                      Location:

Sanitary Sewer                      Location:

Storm Sewer                      Location:

Electric                      Location:

Other                      Location:

7. **Is ANY part of the proposed consolidation in a:**

Floodplain                      Yes                      No                      If yes, permit from appropriate agency MUST be attached.

Wetland                      Yes                      No                      If yes, permit from appropriate agency MUST be attached.

8. **Will the consolidation contain any new rights-of-way to be dedicated?**                      Yes                      No

If yes, describe and list separately.

9. **Are there any existing covenants or restrictions on the property proposed for consolidation?**                      Yes                      No

If Yes, describe:

# CONSOLIDATION APPLICATION

## Findings of Fact

The Planning and Zoning Commission will take into consideration the factors listed below in making its recommendation to the City Council. As the applicant, you must demonstrate why the proposed consolidation is appropriate. Each of the questions below must be addressed as part of the application. If you do not believe a particular factor does not apply to the property in question, indicate “Not applicable” and explain why it does not apply.

- 1. Describe how the proposed consolidation will be compatible with the existing uses and zoning of the subject property, along with adjacent and nearby properties.**
- 2. Will this proposed consolidation require any variances from the requirements of the Subdivision Ordinance or Zoning Ordinance? *If so, please identify those variances and how much they would vary from the Subdivision Ordinance and Zoning Ordinance.***
- 3. Describe how the proposed consolidation will not have any adverse effect on the value of adjacent properties.**
- 4. Describe how public facilities and services are/will be adequate for the proposed consolidation.**

# CONSOLIDATION APPLICATION

## Signatures and Notary Seal

I (We) certify that all of the above statements and statements on any documents or drawings submitted herewith are true to the best of my (our) knowledge and belief.

Name of Applicant

\_\_\_\_\_  
Signature of Applicant and Date

Name of Property Owner

\_\_\_\_\_  
Signature of Property Owner and Date

**SIGNATURE BY THE PROPERTY OWNER GRANTS ACCESS TO THE PROPERTY IN QUESTION TO THE CITY OF WAUKEGAN, ITS STAFF, COMMISSION AND CITY COUNCIL MEMBERS.**

## NOTARY

STATE OF \_\_\_\_\_ )

) SS.

COUNTY OF \_\_\_\_\_ )

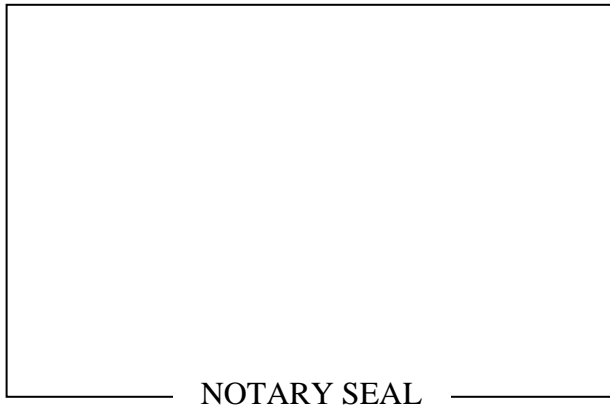
I, the undersigned, a Notary Public, in and for said County, in the State aforesaid, DO HEREBY CERTIFY THAT

\_\_\_\_\_  
(NAME OF APPLICANT)

is/are personally known to me, that said person(s) appeared before me this day in person and severally acknowledged that he/she/they signed and delivered the forgoing owners authorization above as his/her/their free and voluntary act for the uses and purposes herein set forth.

Given under my hand and Notary Seal, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of Notary Public



# CONSOLIDATION APPLICATION

## PROCEDURES

1. Pre-Application Meeting. A pre-application meeting with the Department of Planning and Zoning is **MANDATORY** prior to the preparation of this application. The applicant and/or his representative are asked to review the application prior to this meeting so that any questions regarding what is required can be addressed.
2. Submittal Meeting. Applications are due **BEFORE** the 8th of the month in order to be placed on the Planning and Zoning Commission agenda for the following month. This allows for the required publication of notices and the mailing of notices to surrounding property owners. The applicant and/or his representative are required to schedule and personally attend the submittal meeting. Applications **WILL NOT** be accepted without scheduling a submittal meeting. Applications will also not be accepted if there is anything missing from the Attachment Checklist below. Missing information may postpone the hearing date of this application until the month after the following month. Staff shall review the application for completeness, to make certain that the application meets the requirements of the Zoning Ordinance, and to issue a placard which the applicant must display on the subject property indicating the date and time of the public hearing.
3. Post Notification of Public Hearing. The applicant is responsible for and is **REQUIRED** by the Zoning Ordinance to post notification of the Planning and Zoning Commission's public hearing in a conspicuous place on the subject property facing the nearest improved street, not less than 15 days before the public hearing. This notification shall be posted on forms provided by the City of Waukegan Planning and Zoning Department.
4. Public Hearing. The applicant and/or his representative is **REQUIRED** to attend the Planning and Zoning Commission's public hearing whenever the proposed subdivision is scheduled to be heard (the second Thursday of the month after the application is received, if received in complete form and prior to the 8<sup>th</sup> of the month). Meetings are held in the City Council Chambers, 100 N. Martin Luther King, Jr. Avenue, Waukegan, Illinois, at 7:00 PM.
5. Community Development Committee Meeting. The applicant and/or his representative are **REQUIRED** to attend the Community Development Committee meeting. Meetings are held in the City Council Chambers, 100 N. Martin Luther King, Jr. Avenue, Waukegan, Illinois, on the first Monday of the month (and after the Planning and Zoning Commission public hearing) anytime between 5:00 PM and 7:00 PM.
6. City Council Meeting. If the Judiciary Committee forwards a recommendation, this application will be considered by the full City Council on the third Monday of the month at 7:00 PM.

## ATTACHMENT CHECKLIST

Fifteen (15) hard copies of the following:

This application

Plat of Survey of subject property prepared by an Illinois Registered Land Surveyor

Proposed Plat of Consolidation (Subdivision)

Covenants, Conditions and Restrictions (CC & R's) if one is proposed.

One (1) hard copy of the following:

Deed or title insurance policy that provides proof of parcel ownership

A Lake County tax map showing all properties within 250 feet of subject property. Copies of the map can be obtained at the Lake County Map Services Department, 18 N. County Street, Waukegan, Illinois.

A typed listing of all property addresses, which includes the full names of current property owners, mailing addresses of the property owners, and Parcel Identification Numbers (PINs), which are partially or entirely within 250 feet from the edge of the subject property

One (1) electronic copy of everything above, **EXCEPT** the following: Deed, the Lake County tax map, listing of all current property owners.

Application fee of \$300.00 for the plat of consolidation, payable to the City of Waukegan.

# CONSOLIDATION APPLICATION

## **RECORDING REQUIREMENTS CHECKLIST**

(Per the Lake County Recorder of Deeds Office)

Is the plat an original between 8½” x 14” and 30” x 36”?

Has the Surveyor authorized the City of Waukegan to record the plat by a statement with his original signature and seal? This may be on a separate piece of paper, but must include the surveyor’s original signature and seal.

Does the plat contain the name and address of the party submitting the recording?

Does the plat have a mail-to address specified?

Has the Surveyor signed and sealed the plat after completing the legal description, a description of public ways and utilities, a certificate stating the location of the property within the municipality or the county, FEMA certification, and Department of Natural Resources approval?

Has the owner, his representative, or a trust officer signed the plat and included the printed name and address of the signer?

Has the City Clerk’s Office approved the plat and indicated same by signature, date and seal?

Has the City Engineer approved the plat and indicated same by signature and date?

Has the Plat Administrator approved the plat and indicated same by signature and date?

Has the Chairman of the Planning and Zoning Commission approved the plat and indicated same by signature and date?

Has the City Collector signed off on the plat?

Has the county plat officer approved the plat and signed and sealed it?

Has LCDOT or IDOT signed and sealed the plat? (Applies to plats which abut applicable roads).

Has the County Clerk certified tax payment and signed and sealed the plat?