

DEPARTMENT OF PLANNING, BUILDING & ZONING

111 West Fox Street • Yorkville, IL • 60560(630) 553-4141Fax (630) 553-4179

REGISTRATION OF SINGLE – FAMILY BUILDING PERMIT ALLOCATION

PETITIONER IN NAME OF PROF (First, Middle Init		MAILING ADDRESS	CITY, STATE, ZIP	
DUONE #				
PHONE #	FAX #		OTHER #(PAGER, CELL, ETC)	
SITE INFORMAT		SITE LOCATION	ASSESSOR'S ID NUMBER	
(IN ACRES)				
PROVISION IN WHICH THE PARCEL IS TO BE REGISTERED (SELECT ONE)				
Any parcel in excess of 40 acres may have one allocation for a single-family building permit for each 40 acres of available land.				
	Replacement Home			
(NOTE: It is the policy of Kendall County to allow for the construction of replacement homes on any agricultural tract of land, provided the owner can demonstrate that a home previously existed on the premises. Documentation shall be provided to the Kendall County Zoning Administrator for review and determination as to whether the property qualifies for a replacement home. Documentation shall include one or more the items listed in the "Information Checklist" below.)				
INFORMATION CHECKLIST:				
•	Map showing the boundaries of the property being registered			
	Current deed and legal description			
	Applicable)	ohs documenting the prior exist	tence of a home on the property. (if	
	Historic Tax Records, pro a home on the property.		ks documenting the prior existence of	
	Physical evidence such a residence. (if applicable)	as a foundation which can be r	eadily identified as a pre-existing	
	Other legal documentation applicable)	on verifying the prior existence	of a residential dwelling. (if	
NOTICE: As each allocation is utilized, the owner will be required to identify the location within the original				
property registered on which the new residence will actually be built. The parcel on which the house will be built must be on a separate zoning lot of not less than 130,000 square feet in size and not less than 200				
feet in width at the front building setback line.				
I CERTIFY THAT THE INFORMATION AND EXHIBITS SUBMITTED ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I AM TO FILE THIS APPLICATION AND ACT ON BEHALF OF THE ABOVE SIGNATURES. THE APPLICANT ATTESTS THAT THEY ARE FREE OF DEBT OR CURRENT ON ALL DEBTS				
OWED TO KENDALL COUNTY AS OF THE DATE OF THE APPLICATION. SIGNATURE OF APPLICANT DATE				