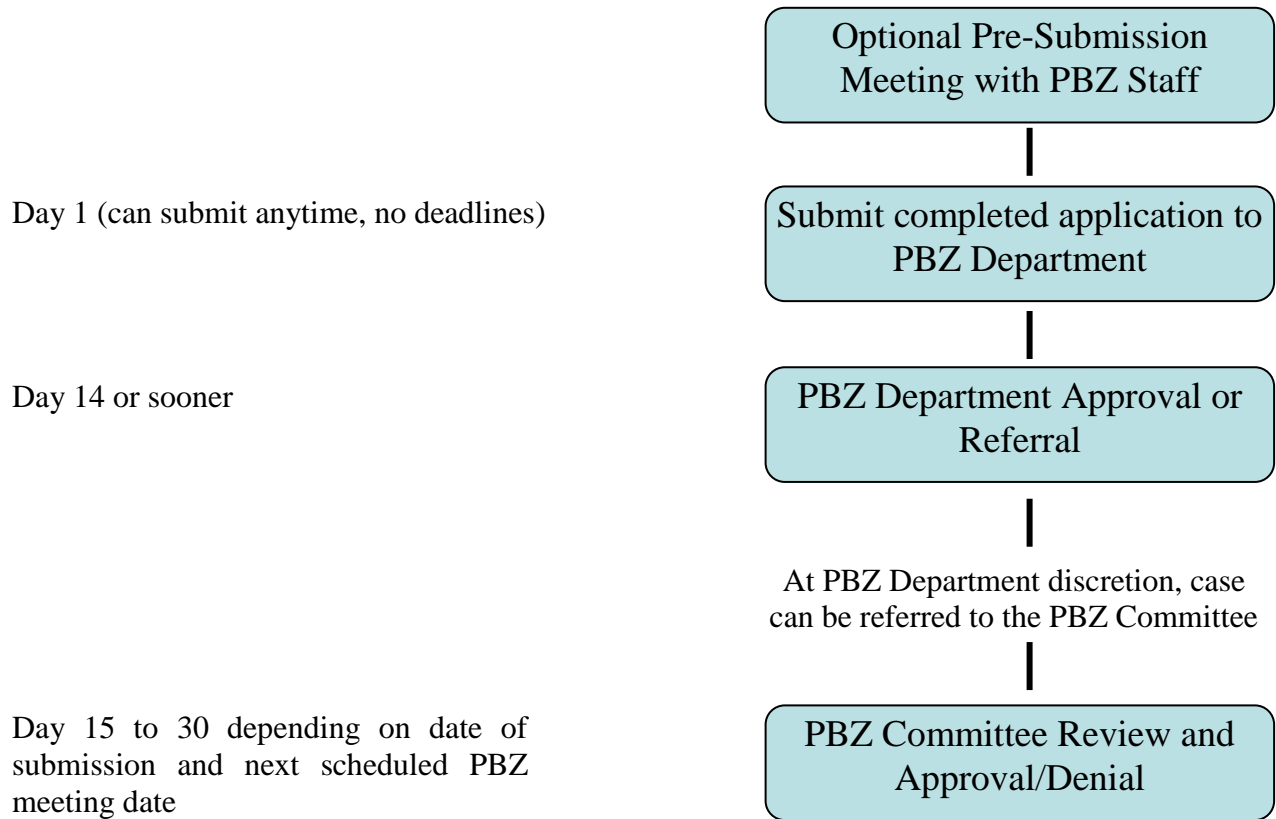


# Kendall County Conditional Use Process



## Notes:

1. Timeline assumes application submittal is complete, and no major changes are requested during the review process.
2. The PBZ Committee may continue or table an item if it is determined that additional time is needed for review. Such actions will extend the review process.



**DEPARTMENT OF PLANNING, BUILDING & ZONING**

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

**CONDITIONAL USE APPLICATION**

PROJECT NAME \_\_\_\_\_ FILE #: \_\_\_\_\_

NAME OF APPLICANT (Including First, Middle Initial, and Last Name)		
CURRENT LANDOWNER/NAME(s)		
<b>SITE INFORMATION</b>		
ACRES	SITE ADDRESS OR LOCATION	ASSESSOR'S ID NUMBER (PIN)
EXISTING LAND USE	CURRENT ZONING	LAND CLASSIFICATION ON LRMP
<b>REQUESTED ACTION (Check All That Apply): <u>YOU MUST MEET ALL CONDITIONS LISTED IN THE ORDINANCE TO QUALIFY</u></b>		
<input type="checkbox"/> SMALL WIND ENERGY SYSTEM	<input type="checkbox"/> RIDING STABLES	
<input type="checkbox"/> ECHO HOUSING	<input type="checkbox"/> BUYING AND SELLING OF LIVESTOCK	<input type="checkbox"/> FEED YARDS
<input type="checkbox"/> ACCESSORY AGRICULTURAL SERVICES	<input type="checkbox"/> TRUCK/TRACTOR AMUSEMENTS	<input type="checkbox"/> PUBLIC 911 SAFETY TOWER
<input type="checkbox"/> AGRICULTURAL LABOR HOUSING	<input type="checkbox"/> GUEST HOUSE	<input type="checkbox"/> SINGLE FAMILY DWELLING
<input type="checkbox"/> HOME-BASED FOOD OPERATION	<input type="checkbox"/> MODEL HOME	<input type="checkbox"/> PLACES OF WORSHIP
<input type="checkbox"/> SCHOOL	<input type="checkbox"/> DRY CLEANER	<input type="checkbox"/> LAUNDRYMAT (SELF-SERVICE)
<input type="checkbox"/> ELECTRICAL APPLIANCE STORE	<input type="checkbox"/> CONSTRUCTION SERVICES	<input type="checkbox"/> CONTRACTOR'S OFFICE
<input type="checkbox"/> ENCLOSED SELF-SERVICE STORAGE	<input type="checkbox"/> LABORATORIES	<input type="checkbox"/> OUTDOOR DISPLAY
<input type="checkbox"/> PROCESSING OR ASSEMBLY		
<sup>1</sup> PRIMARY CONTACT EMAIL	PRIMARY CONTACT MAILING ADDRESS	PRIMARY CONTACT
PRIMARY CONTACT PHONE #	PRIMARY CONTACT FAX #	PRIMARY CONTACT OTHER #(Cell, etc.)
I UNDERSTAND THAT BY SIGNING THIS FORM, THAT THE PROPERTY IN QUESTION MAY BE VISITED BY COUNTY STAFF & BOARD/ COMMISSION MEMBERS THROUGHOUT THE PETITION PROCESS AND THAT THE PRIMARY CONTACT LISTED ABOVE WILL BE SUBJECT TO ALL CORRESPONDANCE ISSUED BY THE COUNTY.		
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. <b>THE APPLICANT ATTESTS THAT THEY ARE FREE OF DEBT OR CURRENT ON ALL DEBTS OWED TO KENDALL COUNTY AS OF THE APPLICATION DATE.</b>		
SIGNATURE OF APPLICANT		DATE

FEE PAID: \$ \_\_\_\_\_  
 CHECK #: \_\_\_\_\_

<sup>1</sup>Primary Contact will receive all correspondence from County



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## DEPARTMENT OF PLANNING, BUILDING & ZONING

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# CONDITIONAL USE APPLICATION CHECKLIST

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- \_\_\_\_\_ Completed Application Form
- \_\_\_\_\_ Application Fee
- \_\_\_\_\_ Legal Description of Property Involved (submitted either on CD or email to PBZ Dept.)
- \_\_\_\_\_ Proof of Ownership (Deed or Title Insurance Policy)
- \_\_\_\_\_ A Beneficiary Disclosure Statement for Property (if held in trust)
- \_\_\_\_\_ Proof of Application to Soil and Water Conservation District for Natural Resource Inventory (If needed)
- \_\_\_\_\_ Affidavit signed saying you will abide by all the conditions (Please ask staff for affidavit before applying, each affidavit is different depending on the use)
- \_\_\_\_\_ 2 Copies of a Plat of Survey less than five years old depicting the following items\*:
  - \_\_\_\_\_ Title
  - \_\_\_\_\_ Scale of Drawing
  - \_\_\_\_\_ "North Arrow" showing north at top of the drawing
  - \_\_\_\_\_ Location Map
  - \_\_\_\_\_ Date of drawing (as well as dates of any and all revisions)
  - \_\_\_\_\_ Names of Developer/Owner
  - \_\_\_\_\_ Names of Designer/Surveyor
  - \_\_\_\_\_ All existing structures on the property and adjacent properties within 100' of property line
  - \_\_\_\_\_ Proposed location of dwelling unit with distances to lot lines
  - \_\_\_\_\_ Proposed location of well and septic
  - \_\_\_\_\_ Utilities on the property and adjacent properties
  - \_\_\_\_\_ Existing easements (location, width and purpose)
  - \_\_\_\_\_ Existing streets and other rights-of-way
  - \_\_\_\_\_ Topography at 1 or 2 foot contours
  - \_\_\_\_\_ Wooded areas (if present)
  - \_\_\_\_\_ Natural drainage to, from and on the property
  - \_\_\_\_\_ Base Flood Elevation (if present on the property)
  - \_\_\_\_\_ Wetlands (if present on the property)
  - \_\_\_\_\_ Present zoning classification and PIN on subject property and all adjacent properties on plat or separate plan

\*if submitting copies of 11"x17" or smaller, one additional 24"x36" copy is requested for display purposes.

KENDALL COUNTY  
DISCLOSURE OF BENEFICIARIES FORM

1. Applicant \_\_\_\_\_  
Address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

2. Nature of Benefit Sought \_\_\_\_\_

3. Nature of Applicant: (Please check one)
- Natural Person (a)
  - Corporation (b)
  - Land Trust/Trustee (c)
  - Trust/Trustee (d)
  - Partnership (e)
  - Joint Venture (f)

4. If applicant is an entity other than described in Section 3, briefly state the nature and characteristics of the applicant:

5. If your answer to Section 3 you have checked letter b, c, d, e, or f, identify by name and address each person or entity who is a 5% shareholder in case of a corporation, a beneficiary in the case of a trust or land trust, a joint venture in the case of a joint venture, or who otherwise has proprietary interest, interest in profits and losses or right to control such entity:

NAME	ADDRESS	INTEREST

6. Name, address, and capacity of person making this disclosure on behalf of the applicant:

\_\_\_\_\_

VERIFICATION

I, \_\_\_\_\_, being first duly sworn under oath that I am the person making this disclosure on behalf of the applicant, that I am duly authorized to make the disclosure, that I have read the above and foregoing Disclosure of Beneficiaries, and that the statements contained therein are true in both substance and fact.

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, A.D. \_\_\_\_\_

(seal)

\_\_\_\_\_  
Notary Public





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**ZONING APPLICATION FEES**

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**MAP AMENDMENTS**

Any amount of acreage \$500.00

**SPECIAL USE PERMITS, PLANNED UNIT DEVELOPMENTS/ RESIDENTIAL PLANNED DEVELOPMENTS AND MAJOR AMENDMENTS TO SPECIAL USES**

*The following fees include a processing fee, a fee for recording the special use in the recorder's office for 10 pages and a cost for the Zoning Board of Appeals at a rate of \$350.00 shall be imposed on ALL Special Uses*

All acreage zoned as A-1	\$1,155
All Other Zoning Districts	
0.0-5.00 acres	\$1,155
5.01-10.00 acres	\$1,905
10.01-50.00 acres	\$2,255 + \$50/acre or part thereof over 10 acres
50.01-100.00 acres	\$4,755 + \$35/acre or part thereof over 50 acres
100.01-500.00 acres	\$6,505 + \$20/acre or part thereof over 100 acres
500.01+	\$14,505 + \$15/acre or part thereof over 500 acres

**MINOR AMENDMENT TO SPECIAL USE** *(includes a processing fee and a fee for recording the minor amendment to the special use in the recorder's office)*

Any amount of acreage \$150.00

**VARIANCE** *(includes a processing fee and a fee for recording the variance in the recorder's office)*

As part of Special Use \$100  
Not part of Special Use \$475 for first Variance Request of petition and \$50 for each additional request to be included in the same petition

**ADMINISTRATIVE VARIANCE** *(includes a processing fee and a fee for recording the minor amendment to the special use in the recorder's office)*

Any amount of acreage \$150.00

**PRELIMINARY PLAT**

Residential \$1,000.00 + \$50.00/acre or part of an acre  
Other \$1,000.00 + \$100.00/acre or part of an acre

**FINAL PLAT**

All Final Plats \$50.00/acre or part of an acre (\$500.00 minimum)

OTHER PLAT (Vacation, Dedication, etc.)	
All Other Plat Actions	\$50.00/acre or part of an acre (\$500.00 minimum)
ADMINISTRATIVE APPEAL	\$1,000.00 <sup>1</sup>
TEXT AMENDMENT	\$500.00
SITE PLAN REVIEW	\$375.00
CONDITIONAL USE	\$100.00
TEMPORARY USES	\$100.00

\*\*\*No waiver and no refund shall be made for any fee paid pursuant to this Ordinance without the approval of the Planning Building and Zoning Committee of the County Board\*\*\*

\*\*All fees for actions or activities by Kendall County or the Kendall County Forest Preserve District are hereby waived and all fees for non-profit organizations shall be charged half of the normal fees for zoning petitions; provided they show proof of non-profit status and that the permit be used only by the organizations itself\*\*\*

<sup>1</sup>In the event that ruling by the Zoning Board of Appeals favors the appealing party, the submitted fee for an administrative appeal shall be refunded to the applicant.

The deposit fee for renting the 2012 National Rifle Association Range Source Book can be found in Ordinance 2019-15.

ZONING FEES ESTABLISHED BY KENDALL COUNTY ORDINANCE EFFECTIVE 12/17/2019