

VILLAGE OF BRIDGEVIEW
ZONING AND PLANNING COMMISSION/ZONING BOARD OF APPEALS
7500 SOUTH OKETO AVENUE
BRIDGEVIEW, IL 60455
(708) 924-8030

APPLICATION FOR ZONING HEARING – REZONING
(MUST BE COMPLETED BY APPLICANT OR ATTORNEY FOR APPLICANT)

With: _____ Variations _____ Special Use Permit

APPLICANT INFORMATION:

Name: _____
Address: _____
City/State/Zip Code: _____
Telephone: _____ Fax: _____

PROPERTY OWNER INFORMATION (if other than Applicant):

Name: _____
Address: _____
City/State/Zip Code: _____

PROPERTY IDENTIFICATION:

Common Address: _____
P.I.N.: _____
Legal Description: _____

– Space Below For Office Use Only –

Documents Submitted/Date:	
<input type="checkbox"/>	Proof of Ownership _____
<input type="checkbox"/>	Consent of Owner _____
<input type="checkbox"/>	Survey _____
<input type="checkbox"/>	Affidavit of Service _____
<input type="checkbox"/>	Notice _____
<input type="checkbox"/>	Plat _____
<input type="checkbox"/>	Plan _____
<input type="checkbox"/>	Other: _____
	Describe: _____

Pre-Hearing Processing:	
<input type="checkbox"/>	Submitted for Review
	Date: _____
<input type="checkbox"/>	Approved for Acceptance
	Date: _____
<input type="checkbox"/>	Publication Ordered _____
	Published _____
<input type="checkbox"/>	Hearing Date: _____
<input type="checkbox"/>	Circulated: _____

<input type="checkbox"/>	Granted/Date _____
<input type="checkbox"/>	Denied _____
<input type="checkbox"/>	Findings Dated: _____
<input type="checkbox"/>	Served: _____
<input type="checkbox"/>	Circulated: _____
<input type="checkbox"/>	Village Board Date: _____
	Ordinance No. _____

<input type="checkbox"/>	FEE(S) PAID: \$ _____
	DATE PAID: _____

EXISTING ZONING DISTRICT: _____

REQUESTED ZONING DISTRICT: _____

PURPOSE OF REZONING:

_____ Single Family Home(s)

_____ Townhouse Development

_____ Commercial Bldg.

Number: _____

Number of Buildings: _____

Type: _____

Number of Units: _____

_____ Other. Describe: _____

SUPPORTING DOCUMENTS:

Attach the following supporting documents to the application and check line to indicate each document's submission:

_____ Proof of Ownership (deed or title insurance policy). If the applicant is not the owner, also include owner's written consent to apply on owner's behalf.

_____ Survey

_____ Plat or Plan(s) of Proposed Improvements

_____ Plat of Parking Spaces (if applicable)

_____ Plat of Subdivision (if applicable)

_____ Other (name/describe): _____

VARIATION(S) REQUESTED? _____ Yes _____ No

For each variation requested, identify the relevant section of the Bridgeview Zoning Ordinance and briefly describe the nature of the variation sought:

1) Section _____: _____

2) Section _____: _____

3) Section _____: _____

4) Section _____: _____

SPECIAL USE PERMIT REQUESTED? _____ Yes _____ No:

Describe: _____

Permitted Special Use? _____ Yes. Ordinance Section Permitting Use: Section _____
_____ No. Briefly explain basis for use: _____

This application must be accompanied by all required supporting documents and all applicable fees. Applicant agrees to assume responsibility for all reasonable expenses incurred by the Village in the review of the application. No application shall be deemed officially accepted unless all fees have been paid in full. Applicant acknowledges his/her/its responsibility of compliance with all applicable ordinances and rules.

State of Illinois)
) ss.
County of Cook)

The Applicant hereby certifies that all matters set forth in this application are true and correct.

(Applicant)

Subscribed and Sworn to before
me this _____ day of
_____, _____.

(Notary Seal)

Notary Public