

Kane County Government Center 719 Batavia Ave, Geneva, IL 60134 - Building A | (630) 232-3485

ZONING APPLICATION: Special Use Permit (COMMERCIAL SOLAR FACILITY)

APPLICANT		
Name		
First Name	Last N	ame
Address		
Street Address		
City	State	Postal/Zip Code
Phone Number	Email	
Company	Website	
Authorized Agent / Primary Point of Yes, I am the Authorized A PROPERTY OWNER Name	gent and Primary Point of Contact for t	his Zoning Petition Application.
First Name	Last Name	
Address		
Street Address		
City	State	Postal/Zip Code
Phone Number	Email	
Statement of Authorization (If App	licant is not the Property Owner)	



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SUBJECT PROPERTY

Street Address / Common Location

Parcel Identification Number(s)

Township(s)

01 Hampshire (HA)	06 Elgin (EL)
02 Rutland (RU)	07 Virgil (VI)
03 Dundee (DU)	08 Campton (CA)
04 Burlington (BU)	09 St. Charles (SC)
05 Plato (PL)	10 Kaneville (KA)

Current Zoning District(s)

For reference, see the Kane County Zoning Atlas Maps.

Current Land Use(s)

2040 Future Land Use Designation(s)

For reference, see the Kane County 2040 Plan.

PROPOSED SPECIAL USE

Requested Special Use

Area (Acres/S.F.) of Special Use

Brief Project Description

Property Acres

11 Blackberry (BL)12 Geneva/Batavia (GE/BA)13 Big Rock (BR)14 Sugar Grove (SG)15 Aurora (AU)



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ADDITIONAL SPECIAL USE INFORMATION

1. How does the proposed use relate to the existing uses of property within the general area of the property in question?

2. What are the zoning classifications of properties in the general area of the property in question?

3. How does the suitability of the property in question relate to the uses permitted under the existing zoning classification?

4. What is the trend of development, if any, in the general area of the property in question?

5. How does the projected use of the property relate to the Kane County 2040 Land Use Plan?



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REQUIRED SUBMITTAL DOCUMENTS

See APPENDIX D: REQUIRED SUBMITTAL DOCUMENTS

APPLICATION VERIFCATION

Undersigned certifies that all answers and information provided in this Zoning Application for a Special Use Permit and associated documents are true, correct and complete to the best of his/her knowledge.

Record Owner

Applicant or Authorized Agent

Date

Date