



ZONING BOARD OF APPEALS OF THE CITY OF CHICAGO

PUBLIC HEARING PACKET

Everything submitted in this packet will be made available for public inspection.

INFORMATION ABOUT THE APPEAL			
Address of the Subject Property	1	ADDRESS	
Ward & Zoning District	2	WARD	ZONING DISTRICT To find your zoning district, go to: https://gisapps.chicago.gov/ZoningMapWeb/
Type of Appeal	3	<input type="checkbox"/> Applicant’s Appeal <input type="checkbox"/> Objector’s Appeal	
Name of person who submitted the appeal	4	NAME	
The person who submitted the appeal is	5	<input type="checkbox"/> Self-Represented <input type="checkbox"/> Applicant’s Zoning Attorney <input type="checkbox"/> Applicant’s Principal Representative (if a legal entity)	
Contact Information	6	MAILING ADDRESS	
		EMAIL	
		PHONE	

INFORMATION ABOUT THE APPELLANT			
Full name of Appellant	7	NAME	
The Appellant is a(n)	8	CHECK ONE <input type="checkbox"/> Individual (if selected, skip to next page) <input type="checkbox"/> Legal Entity	
Type of legal entity	9	<input type="checkbox"/> LLC <input type="checkbox"/> Corporation <input type="checkbox"/> Trust <input type="checkbox"/> Nonprofit <input type="checkbox"/> Other _____	
List the name(s) and title(s) of the Appellant’s principal representative(s) present at the hearing.	10	NAME(S)	TITLE(S)
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		•	•
		•	•
		•	•
		•	•

APPEAL

The Zoning Board of Appeals is authorized to hear and decide appeals when it is alleged that there is an error in any order, requirement, decision or determination made by the Zoning Administrator in the administration or enforcement of the Chicago Zoning Ordinance. The Zoning Board of Appeals must grant to the Zoning Administrator's decision a presumption of correctness, placing the burden of persuasion of error on the appellant. An appeal may be sustained only if the Zoning Board of Appeals finds that the Zoning Administrator erred.

Please answer each of the questions below. FOR APPLICANT'S APPEALS: No new evidence other than what was submitted to the Zoning Administrator in rendering their initial decision will be accepted. FOR OBJECTOR'S APPEALS ONLY: Any evidence may be included as exhibits at the end of this packet. Label them as Exhibit 1, 2, 3, etc. and fill out the Table of Exhibits accordingly.

1. Please provide a summary of events leading up to this appeal:

2. The specific decision being appealed is:

3. The decision was inconsistent with the following section(s) of the Chicago Zoning Ordinance (Identify each section by number and quote the relevant language of each):

4. The Zoning Administrator erred with regard to the administration or enforcement of the above-described section(s) of the Chicago Zoning Ordinance because:

5. The Appellant requests the following relief from the Zoning Board of Appeals:

SIGNATURE AND CERTIFICATION

Under the penalty of perjury pursuant to Section 1-109 of the Illinois Code of Civil Procedure, I certify that all of the above statements in the Appeal Public Hearing Packet and on any documents, photos and/or drawings submitted herewith as evidence are true, correct, and complete as of the date signed to the best of my knowledge and belief.

Print Name: _____
APPLICANT (or if Legal Entity, APPLICANT’S PRINCIPAL REPRESENTATIVE)

Signature: _____
APPLICANT (or if Legal Entity, APPLICANT’S PRINCIPAL REPRESENTATIVE)

Date: _____

