

**CITY OF ST. CHARLES**  
 TWO EAST MAIN STREET  
 ST. CHARLES, ILLINOIS 60174-1984



COMMUNITY DEVELOPMENT/PLANNING DIVISION

PHONE: (630) 377-4443 FAX: (630) 377-4062

**MINOR CHANGE TO PUD APPLICATION**

*Received Date*

<b>CITYVIEW</b>	
Project Name:	_____
Project Number:	_____ -PR- _____
Application No.	_____ -AP- _____

*Instructions:*

*A Minor Change to PUD is one that modifies an approved PUD Preliminary Plan in a manner that complies with all standards of the Special Use for PUD Ordinance applicable to the property and meets the definition of a Minor Change as contained either in Section 17.04.430 of the Zoning Ordinance or the Special Use for PUD Ordinance.*

*To request approval of a Minor Change, complete this application and submit it with all required attachments to the Planning Division. When the application is complete, City staff will schedule a review by the Planning and Development Committee of the City Council. The Committee's recommendation will be forwarded to the City Council for final action.*

*The information you provide must be complete and accurate. If you have a question please call the Planning Division and we will be happy to assist you.*

<b>1. Property Information:</b>	Parcel Number (s):	
	Street Address (or common location if no address is assigned):	
<b>2. Applicant Information:</b>	Name	Phone
	Address	Fax
		Email
<b>3. Record Owner Information:</b>	Name	Phone
	Address	Fax
		Email
<b>4. Billing:</b> <i>To whom should costs for this application be billed?</i>	Name	Phone
	Address	Fax
		Email

**INFORMATION FOR PROPOSED MINOR CHANGE:**

NAME OF PUD: \_\_\_\_\_

PUD ORDINANCE #: \_\_\_\_\_

Identify Specific PUD Plans to be changed:

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

Description of Proposed Changes:

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***Attachment Checklist***

- APPLICATION:** Completed application form signed by the applicant
- APPLICATION FEE:** Application fee in accordance with Appendix B of the Zoning Ordinance.
- REIMBURSEMENT OF FEES AGREEMENT:** An original, executed Reimbursement of Fees Agreement and deposit of funds in escrow with the City, as provided by Appendix B of the Zoning Ordinance.
- PROOF OF OWNERSHIP and DISCLOSURE:**
  - a) a current title policy report; or
  - b) a deed and a current title search.

If the owner is not the applicant, an original letter of authorization from the owner permitting the applicant to act on his/her behalf is required. If the owner or applicant is a Trust, a disclosure of all beneficiaries; if the owner or applicant is a Partnership, a disclosure of all partners; if the owner or applicant is a Corporation, a disclosure of all owners with an interest of at least ten percent (10%).

- LEGAL DESCRIPTION:** For entire subject property, on 8 ½ x 11 inch paper
- PLAT OF SURVEY:**  
A current plat of survey for the Subject Realty showing all existing improvements on the property, prepared by a registered Illinois Professional Land Surveyor.
- COVER LETTER:** describing the proposed minor change requested, why it is necessary, and how it is different from the currently approved plan.

□ **PLANS:**

All required plans shall be drawn on sheets no larger than 24" x 36", unless the Director of Community Development permits a larger size when necessary to show a more comprehensive view of the project. All required plans shall show north arrow and scale, and shall be drawn at the same scale (except that a different scale may be used to show details or specific features). All plans shall include the name of the project, developer or owner of site, person or firm preparing the plan, and the date of plan preparation and all revisions.

**Copies of Plans:**

- Initial Submittal - Fifteen (15) full size copies, Three (3) 11" by 17", and a PDF electronic file on a CD-ROM.

**Plans Shall include the following:**

- Site Plan indicating location of proposed change.
- Existing streets on and adjacent to the tract.
- Architectural elevations showing existing/approved and proposed building design, color and materials (if applicable)
- If change is proposed to landscaping, show approved and proposed drawings, indicate species and quantities of plant material to replace existing/approved materials.

*Additional information may be necessary depending on the specific change proposed.*

**I (we) certify that this application and the documents submitted with it are true and correct to the best of my (our) knowledge and belief.**

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Record Owner

Date

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Applicant or Authorized Agent

Date

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DEPARTMENT: COMMUNITY DEVELOPMENT/PLANNING      PHONE: (630) 377-4443      FAX: (630) 377-4062

**SCHEDULE OF APPLICATION FEES**

**DEVELOPMENTS WITHIN CORPORATE LIMITS**

Type of Application	Application Fee
Appeals	\$150
Design Review	\$200
Variations	\$300
General (Text) Amendment	\$500
Zoning Map Amendments	\$500
Special Use and Amendment to Special Use	\$750
Annexation of Property	\$500
Annexation Agreement	\$500
PUD Concept Plan	none
Special Use as a Planned Unit Development (PUD)	\$1000
PUD Preliminary Plan (with or without Sketch Plan)	\$500
PUD Final Plans	\$500
Minor Change to PUD	\$200
Preliminary Plan of subdivision/resubdivision (Not a PUD)	\$500
Preliminary Plan of subdivision/resubdivision (of a parcel less than 3 acres) (Not a PUD)	\$300
Subdivision Final Engineering Plan	\$300
Final Plat (Subdivision or PUD)	\$300

**DEVELOPMENTS OUTSIDE CORPORATE LIMITS (WITHIN 1 ½ MILE JURISDICTION)**

Concept plan	No fee
preliminary plan of subdivision, 5 or more lots, with new public road construction	\$300
preliminary plan of subdivision, 1 to 4 lots, with new public road construction	\$200
preliminary plan of subdivision or resubdivision, 1 to 4 lots, no new public road construction	No fee
final plat	\$300

**PLEASE MAKE CHECKS PAYABLE TO THE CITY OF ST. CHARLES**

**CITY OF ST. CHARLES**  
**REIMBURSEMENT OF FEES AGREEMENT**

City of St. Charles Acct. # \_\_\_\_\_

**I. Owner:**

Owner of Property: \_\_\_\_\_ Date: \_\_\_\_\_

Owner's Address: \_\_\_\_\_

\_\_\_\_\_

Owner's Phone Number: \_\_\_\_\_

If Owner is a Land Trust, the names and addresses of the beneficiaries of the Trust:

\_\_\_\_\_

**II. Person Making Request (Petitioner/Applicant):**

Name of Petitioner/Applicant: \_\_\_\_\_

Petitioner's/Applicant's Address: \_\_\_\_\_

\_\_\_\_\_

Petitioner's /Applicant's Phone Number: \_\_\_\_\_

**III. Location of Property:**

General Location of Property: \_\_\_\_\_

Acreage of Parcel: \_\_\_\_\_

Permanent Index Number(s): \_\_\_\_\_

Legal Description (attach as Exhibit A)

**IV. Reimbursement of Fees:**

If the City determines, in its sole and exclusive discretion, that it is necessary to obtain professional services, including, but not limited to, attorneys; engineers; planners; architects; surveyors; court reporters; traffic, drainage or other consultants, and/or to incur costs related to any required notices or recordations, in connection with any Petition or Application filed by the Petitioner/Applicant, then the Petitioner/Applicant and Owner shall be jointly and severally liable for the payment of such professional fees and costs, as shall actually be incurred by the City.

The City Administrator is hereby authorized to assign the above described services to the City staff or to consultants, as they deem appropriate. When the City staff renders any services contemplated by this agreement, then in such case the City shall be reimbursed for its cost per productive work hour for each staff person providing said services.

At the time the Petitioner/Applicant requests action from the City, he shall deposit the following amounts with the City as an initial deposit to collateralize the obligation for payment of such fees and expenses:

Number of Review Items	Under 5 Acres	5-15 Acres	16-75 Acres	Over 75 Acres
1	\$1,000	\$2,000	\$3,000	\$4,000
2 or 3	\$2,000	\$4,000	\$5,000	\$7,000
4 or more	\$3,000	\$5,000	\$7,000	\$10,000

As the review proceeds, the City shall deduct incurred expenditures and costs from the funds deposited. If the remaining deposit balance falls below \$500.00, the petitioner/applicant, upon notice by the City, shall be required to replenish the deposit to its original amount. The Petitioner/ Applicant shall replenish the deposit amount within fifteen (15) days of receipt of an invoice directing the replenishment of said deposit. Failure to remit payment within fifteen (15) days will cause all reviews to cease.

A petitioner/applicant who withdraws his petition or application may apply in writing to the Director of Community Development for a refund of his initial deposit. The City Administrator may, in his sole discretion, approve such refund less any actual fees and costs, which the City has already paid or incurred relative to the Petition or Application.

Upon the failure to the Petitioner/Applicant or Owner to reimburse the City in accordance with this Agreement, no further action shall be undertaken on any Petition or Application by the Mayor and City Council, or by any other official or quasi-deliberations, the granting of any relief or approvals, and the execution or recording of any documents, until all such outstanding fees are paid in full and/or the initial deposit is restored to its full amount. Further, the City may deny any application for a grading, building or other permit if such amounts have not been paid in full.

Upon any failure to reimburse the City in accordance with this section, the City may in its discretion, apply any or all of the initial deposit to the outstanding balance due and/or elect to place a lien against any real property associated with the Petitioner/Applicant's Petition or Application. In the event such amounts are not paid in full within sixty (60) days after the date when the statement of such amounts due is delivered or deposited in the U.S. mail by the City, such amounts due shall be deemed delinquent and finance charges in accordance the City's policy for accounts receivable shall be added to the amount due until such amount due, including all delinquency charges, is received by the City. Said lien shall be in an amount equal to the outstanding amount owed to the City.

The remedies available to the City as set forth hereinabove are non-exclusive and nothing herein shall be deemed to limit or waive the City's right to seek relief of such fees against any or all are responsible parties in a court of competent jurisdiction.

Any remaining balance of funds deposited pursuant to this Agreement shall be refunded upon the later occurring of the following events: completion of City deliberation on the petition or application, recordation of all necessary documents associated with the petition or application, or issuance of a building permit upon the real property in question.

BY SIGNING BELOW, THE PETITIONER/APPLICANT AND OWNER ACKNOWLEDGE THAT EACH OF THEM HAS READ THE FOREGOING PARAGRAPHS AND EACH OF THEM FULLY UNDERSTANDS AND AGREES TO COMPLY WITH THE TERMS SET FORTH HEREIN. FURTHER, BY SIGNING BELOW, EACH SIGNATORY WARRANTS THAT HE/SHE/IT POSSESSES FULL AUTHORITY TO SO SIGN.

THE PETITIONER/APPLICANT AND OWNER AGREE THAT PETITIONER/APPLICANT AND OWNER SHALL BE JOINTLY AND SEVERALLY LIABLE FOR PAYMENT OF FEES REFERRED TO IN APPLICABLE SECTIONS OF THE ORDINANCES OF THE CITY OF ST. CHARLES, AND AS SET FORTH HEREIN.

City of St. Charles

\_\_\_\_\_  
Petitioner/Applicant

By: \_\_\_\_\_  
City Administrator

\_\_\_\_\_  
Owner

\_\_\_\_\_  
Attest

Date: \_\_\_\_\_

Date: \_\_\_\_\_

**OWNERSHIP DISCLOSURE FORM  
PARTNERSHIPS**

STATE OF ILLINOIS    )  
                                  ) SS.  
KANE COUNTY         )

I, \_\_\_\_\_, being first duly sworn on oath depose and say that I am a  
General Partner of \_\_\_\_\_, an Illinois  
(General) (Limited) Partnership and that the following persons are all of the partners thereof:

- \_\_\_\_\_ (General)(Limited) Partner

By: \_\_\_\_\_ (General)(Limited) Partner

Subscribed and Sworn before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20 \_\_\_\_\_.

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



**OWNERSHIP DISCLOSURE FORM  
LAND TRUST**

STATE OF ILLINOIS    )  
                                  ) SS.  
KANE COUNTY         )

I, \_\_\_\_\_, being first duly sworn on oath depose and say that I am  
Trust Officer of \_\_\_\_\_, and that the following  
persons are all of the beneficiaries of Land Trust No. \_\_\_\_\_:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

By: \_\_\_\_\_, Trust Officer

Subscribed and Sworn before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20 \_\_\_\_\_.

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

**OWNERSHIP DISCLOSURE FORM  
LIMITED LIABILITY COMPANY (L.L.C.)**

STATE OF ILLINOIS    )  
                                  ) SS.  
KANE COUNTY         )

I, \_\_\_\_\_, being first duly sworn on oath depose and say that I am  
Manager of \_\_\_\_\_, an Illinois Limited Liability  
Company (L.L.C.), and that the following persons are all of the members of the said L.L.C.:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

By: \_\_\_\_\_, Manager

Subscribed and Sworn before me this \_\_\_\_\_ day of  
\_\_\_\_\_, 20 \_\_\_\_\_.

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