

VILLAGE OF HINSDALE
COMMUNITY DEVELOPMENT DEPARTMENT
19 East Chicago Avenue
Hinsdale, Illinois 60521-3489
630.789.7030

Application for Certificate of Zoning Compliance

You must complete all portions of this application. If you think certain information is not applicable, then write "N/A." If you need additional space, then attach separate sheets to this form.

Applicant's name: _____

Owner's name (if different): _____

Property address: _____

Property legal description: [attach to this form]

Present zoning classification:

Square footage of property: _____

Lot area per dwelling: _____

Lot dimensions: _____ x _____

Current use of property: _____

Proposed use: Single-family detached dwelling
Other: _____

Approval sought: Building Permit Variation
Special Use Permit Planned Development
Site Plan Exterior Appearance
Design Review
Other: _____

Brief description of request and proposal:

Plans & Specifications: [submit with this form]

	Provided:	Required by Code:
Yards:		
front:	_____	_____
interior side(s)	_____ / _____	_____ / _____

Provided:

Required by Code:

corner side _____

rear _____

Setbacks (businesses and offices):

front: _____

interior side(s) _____ / _____

corner side _____

rear _____

others: _____

Ogden Ave. Center: _____

York Rd. Center: _____

Forest Preserve: _____

Building heights:

principal building(s): _____

accessory building(s): _____

Maximum Elevations:

principal building(s): _____

accessory building(s): _____

Dwelling unit size(s): _____

Total building coverage: _____

Total lot coverage: _____

Floor area ratio: _____

Accessory building(s): _____

Spacing between buildings: [depict on attached plans]

principal building(s): _____

accessory building(s): _____

Number of off-street parking spaces required: _____

Number of loading spaces required: _____

Statement of applicant:

I swear/affirm that the information provided in this form is true and complete. I understand that any omission of applicable or relevant information from this form could be a basis for denial or revocation of the Certificate of Zoning Compliance.

By: _____
Applicant's signature

Applicant's printed name

Dated: _____, 20____.