

**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:** \_\_\_\_\_

**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]

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

**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\_\_\_\_.