

**VILLAGE OF ANTIOCH, LAKE COUNTY**  
**Department of Planning, Zoning & Building**  
**874 Main Street**

Antioch, Illinois 60002

Weekday Hours: 7:30 AM To 4:00 PM Phone: (847) 395-1000 Fax: (847) 395-1920

FILE NO. PZB \_\_\_\_\_

HEARING DATE \_\_\_\_\_

**CONCEPT PLAN APPLICATION**  
**BEFORE THE COMBINED PLANNING COMMISSION AND ZONING BOARD**  
**VILLAGE OF ANTIOCH, ILLINOIS**  
(Submit original plus twenty five copies)

**APPLICATION**

**TO: The Chairperson and Members of the Combined Planning Commission and Zoning Board of Appeals, Antioch, Illinois.**

Petitioners (Names): \_\_\_\_\_  
\_\_\_\_\_

certify that they are the owner(s) of the following described real estate:

(Attach the Legal Description as shown on Warranty Deed or recent Certified Plat of Survey)

PERMANENT INDEX NUMBER(S), (PIN): 02-\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_.  
(From latest real estate tax bill)

That said premises are now classified under the Zoning Ordinance as \_\_\_\_\_

Proposed building/ uses are depicted on the attached drawings prepared by:

\_\_\_\_\_, dated \_\_\_\_\_, and made a part of this Concept Plan Application:

(Please attach relevant information concerning other governmental agency reviews of this request, including correspondence, file numbers, background studies, etc.)

**Description of Proposed Project:**

---

---

---

---

**Data of Applicant and Owner:**

Name of Applicant(s): \_\_\_\_\_

Address of Applicant(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Phone:Day: (     ) \_\_\_\_\_

Phone Evening: (     ) \_\_\_\_\_

Property Interest of Applicant(s):

\_\_\_\_\_  
(Owner, Contract Purchaser, etc.)

Name of Owner(s): \_\_\_\_\_

Address of Owner(s): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Pursuant to the Village Code as amended by Ordinance Number 94-1-3, the ownership of the property must be disclosed. If the property is in Trust, submit to the Village Clerk a Certificate of Trust disclosing all the beneficial owners; If the property is owned by a corporation, submit a letter from the Chief Executive Officer disclosing all the officers of the corporation).

**Attorney for the Petitioner:**

---

---

---

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

**I (we) acknowledge that any and all drawings submitted, of buildings and other habitable structures are preliminary in nature; they accurately describe the maximum proposed dimensions of the proposed structures. Final details regarding the construction of such structures shall be in full compliance with the technical codes adopted within the Antioch Village Code, and in force and effect at the time of the specific and complete permit application.**

**I (we) consent to the entry in or upon the premises described in this application by any authorized official of the Village of Antioch, Illinois, during normal working hours, for the purposes of: viewing the site and/or structures related to this request; and the posting, maintaining, and removing such notices as may be required by law.**

**I (we) certify that all of the above statements and the statements contained in any papers or plans submitted herewith are true to the best of my (our) knowledge and belief.**

APPLICANTS:

|                       |                               |
|-----------------------|-------------------------------|
| _____                 | _____                         |
|                       | (Signature) applicant<br>date |
| _____                 | _____                         |
| (Signature) applicant | date                          |

OWNERS:

|                   |       |
|-------------------|-------|
| _____             | _____ |
| (Signature) owner | date  |
| _____             | _____ |
| (Signature) owner | date  |

APPLICANT'S  
ATTORNEY:

|                      |       |
|----------------------|-------|
| _____                | _____ |
| (Signature) attorney | date  |

=====

OFFICE USE ONLY

REC \_\_\_\_\_

VBoT \_\_\_\_\_

ORD \_\_\_\_\_

FLAT FEE \$ \_\_\_\_\_

ESCROW DEP. \$ \_\_\_\_\_