



Village of Oak Lawn
 9446 South Raymond Avenue
 Oak Lawn, IL 60453-2449
 Phone #: 708/499-7814
 FAX #: 708/499-7823

| | |
|----------------------------|-------|
| FOR OFFICE USE ONLY | |
| Subdivision No. | _____ |
| Date Received | _____ |

THE VILLAGE OF
OAK LAWN

APPLICATION FOR APPROVAL OF SUBDIVISION

Application for: Preliminary Approval
 Final Approval

Subdivision Name: _____

Common Description of Property (Street Address or Location): _____

Real Estate Index No(s): _____

Legal Description of Property to be Subdivided:

Titleholder: Name _____
 Address _____
 City, State, Zip _____ Phone: _____

Petitioner: Name _____
 Address _____
 City, State, Zip _____ Phone: _____

Surveyor: Name _____
 Address _____
 City, State, Zip _____ Phone: _____
 Registration No. _____

Signature of Titleholder

Signature of Petitioner

DO NOT WRITE BELOW THIS LINE

Class of Lots: Class 1 Class 2 Class 3 Class 4 Class 5

Subdivision No. _____
 No. of Lots _____
 Zoning _____
 Meeting Date _____

Fee for Preliminary / Final Approval

1-2 Lots \$ _____
 3-10 Lots \$ _____
 Other \$ _____
 Total Fee \$ _____



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**FINDINGS OF FACT - JUSTIFICATION
FOR THE GRANTING OF A VARIATION**

PETITIONER:
(Name & Address)

COMMON ADDRESS OF PROPERTY THAT IS SUBJECT TO YOUR VARIATION REQUEST:

VARIATION(S) BEING REQUESTED:

PURSUANT TO STATE STATUTE AND THE OAK LAWN VILLAGE CODE, CERTAIN FINDINGS OF FACT MUST BE MADE BEFORE A VARIATION CAN BE GRANTED. IN THAT REGARD, PLEASE PROVIDE A DETAILED RESPONSE TO EACH OF THE FOLLOWING QUESTIONS:

1.) What practical difficulties or particular hardship prevents you from fully complying with all applicable requirements of the Village Code without the variation(s)? _____

2.) Why can the property not yield a reasonable return without the requested variation(s)? _____

3.) What unique circumstances, not caused by your own actions, make the requested variation(s) necessary?

4.) Why will the requested variation(s), if granted, not alter the essential character of the surrounding neighborhood? _____

THIS COMPLETED FORM MUST BE SUBMITTED WITH YOUR VARIATION PETITION.

Signature of Petitioner: _____

Date: _____

