

## **STAFF REPORT**

**DATE:** March 19, 2026  
**TO:** Zoning Board of Appeals  
**FROM:** Francisco Jimenez, Planner  
**RE:** Petition Number: 2026-13, 2026-14, and 2026-15  
Applicant: Joseph Spillie  
Property Owner: Tyler & Gary Schumal  
Location: 81 N. Chicago Street  
Request: A Variation of Use to allow a B-3 (general business) zoning district use in a B-2 (central business) zoning district, Special Use Permit to allow a tattoo studio, and a Variation to allow a tattoo studio within 1,000 feet of a library

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### **Purpose**

The applicant is requesting a Special Use Permit, a Variation of Use, and a Variation to open and operate a tattoo studio at 81 N. Chicago Street. Requested actions from the Zoning Board of Appeals include:

- A Variation of Use to allow a B-3 (general business) zoning district use in a B-2 (central business) zoning district.
- A Variation to allow a tattoo studio within 1,000 feet of a library.
- A Special Use Permit to allow a tattoo studio.

### **Site Specific Information**

The subject property, 81 N. Chicago Street, is a four-story multi-tenant building in downtown Joliet. The tenant space subject to these requests is located on the 3<sup>rd</sup> floor of this building and is approximately 870 square feet. The proposed studio will consist of a waiting area, a utility and janitorial room, and a private tattoo station. Restrooms are shared with other commercial tenants within the building.

### **Surrounding Zoning, Land Use and Character**

Properties in this vicinity are all zoned and located within the B-2 Central Business District.

### **Applicable Regulations**

- Section 47-12.9 B-2 (Central Business) Zoning District - Prohibited Uses
- Section 47-13.2A B-3 (General Business) Zoning District - Special Uses
- Section 47-17.28 Variation of Use

- Section 47-5.2 (C) Criteria for issuance of a Special Use Permit  
(refer to attachment)
- Section 47-19.8 Findings of Facts Supporting a Variation  
(refer to attachment)

**Section 47-17.28: Variation of Use:** *A "variation of use" shall be defined to mean relief from strict compliance with the use limitations of this Ordinance regarding the classification, regulation, and restriction of the location where trades, industries, businesses, and residences may exist.*

### **Discussion**

The applicant seeks to establish a tattoo studio at 81 N. Chicago Street. The proposed studio would operate by appointment only and would not be a walk-in studio. The applicant states that the appointment only model would allow them to control the volume of people, maintain the privacy of clients, and would minimally impact the surrounding area. The Zoning Ordinance specifies that tattoo shops must be a minimum of 1,000 feet from any school, church, day care, park or playground, library, and other tattoo businesses. The proposed studio would be within 1,000 feet of the Ottawa Street branch of the Joliet Public Library; and, therefore, the applicant is also requesting a variation from this spacing requirement. The applicant will comply with all requirements set forth by the City of Joliet as well as the health requirements from Will County and the State of Illinois.

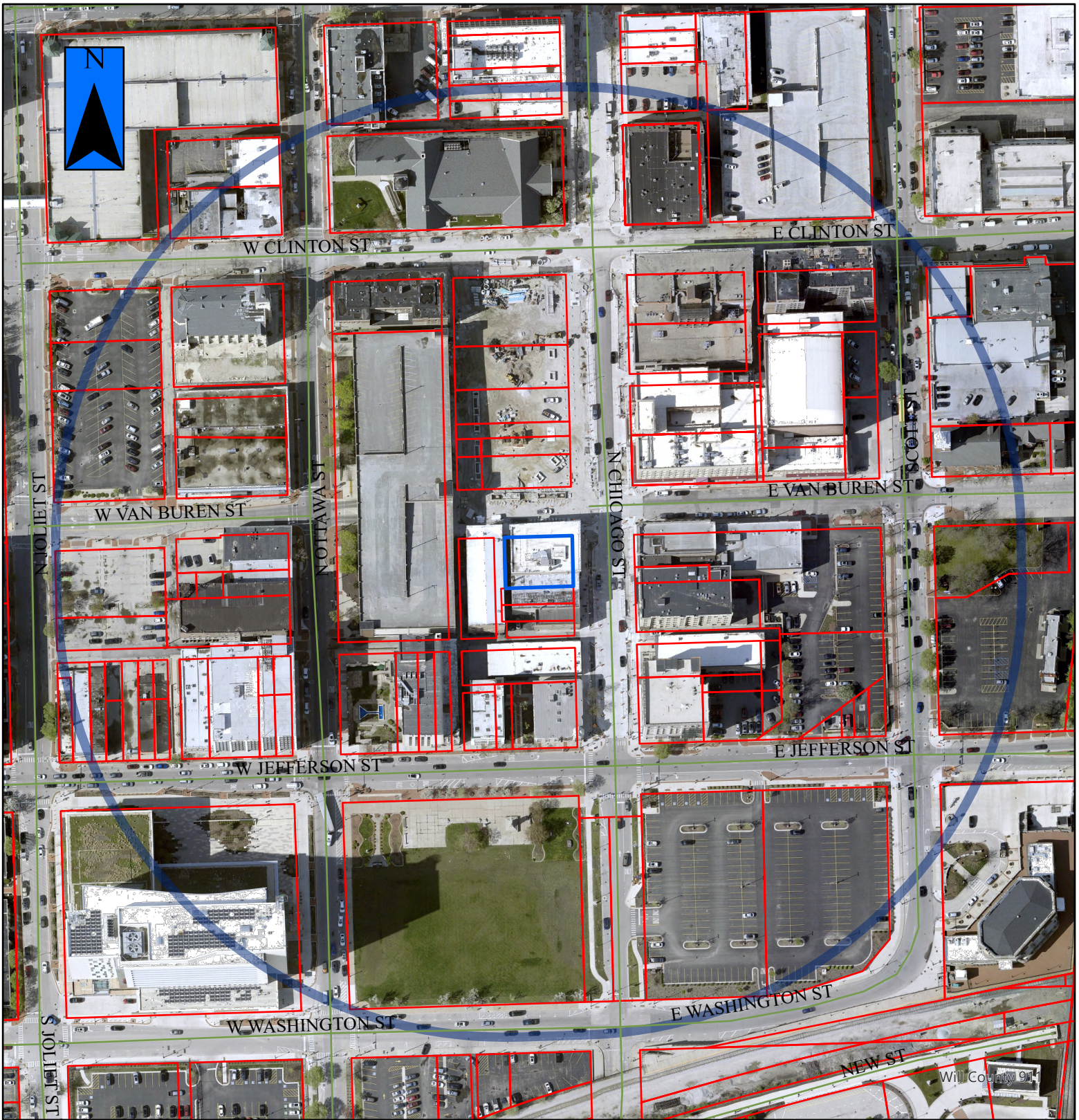
### **Requested Action**

Staff does not find that the Variation of Use and Variation requests meet the criteria for hardship or practical difficulties. Tattoo studios are allowed in the B-3 (General Business) and Industrial zoning districts by Special Use Permit approval. However, staff does find that the proposed tattoo studio would not alter the essential character of the area. The proposed studio will be located on the 3<sup>rd</sup> floor of the building and will serve clients by-appointment only. The proposed studio is also small in size. Additionally, staff finds that the proposal meets the criteria for a Special Use Permit. The establishment of the studio would not be detrimental to the health or general welfare of the public. Additionally, the proposed use will not impede the use and enjoyment of tenant spaces in the building and surrounding property due to studio size and limited volume of clients. The applicant will also apply for all necessary licensing from the City of Joliet and Will County.

### **Conditions**

If the Zoning Board desires to approve the Variation requests and Special Use permit to allow a tattoo studio, the following conditions should be included:

1. That a business license shall be obtained prior to the use commencing.
2. Should the tattoo studio use be declared a public nuisance, it may be subject to a rehearing and a possible revocation of the Special Use Permit and Variation of Use.



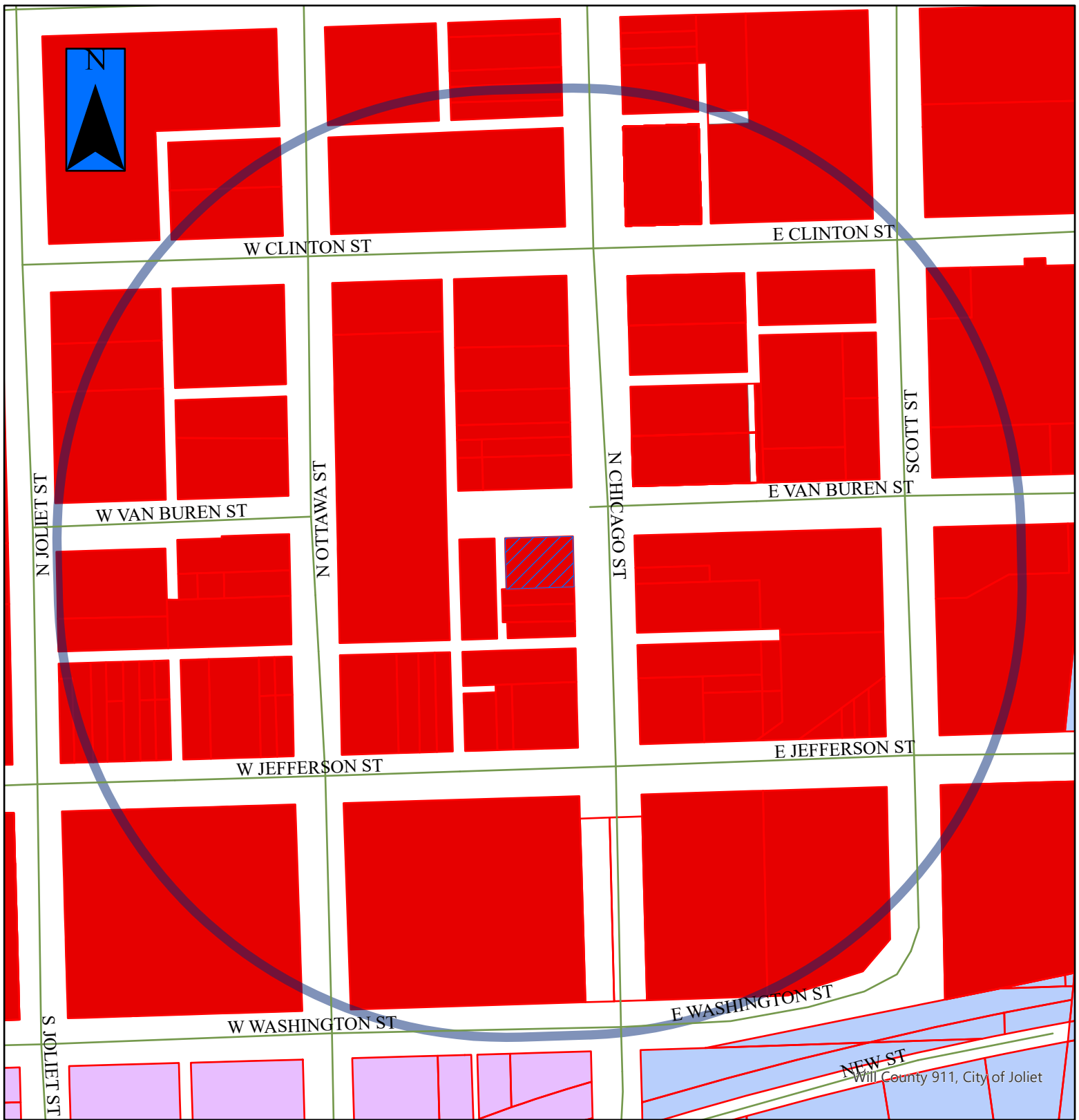
## 2026-13a, 2026-14a, 2026-15a



= Property in Question / Propiedad en cuestión





= 600' Public Notification Boundary /  
Límite de notificación pública de 600 ft (180 m)



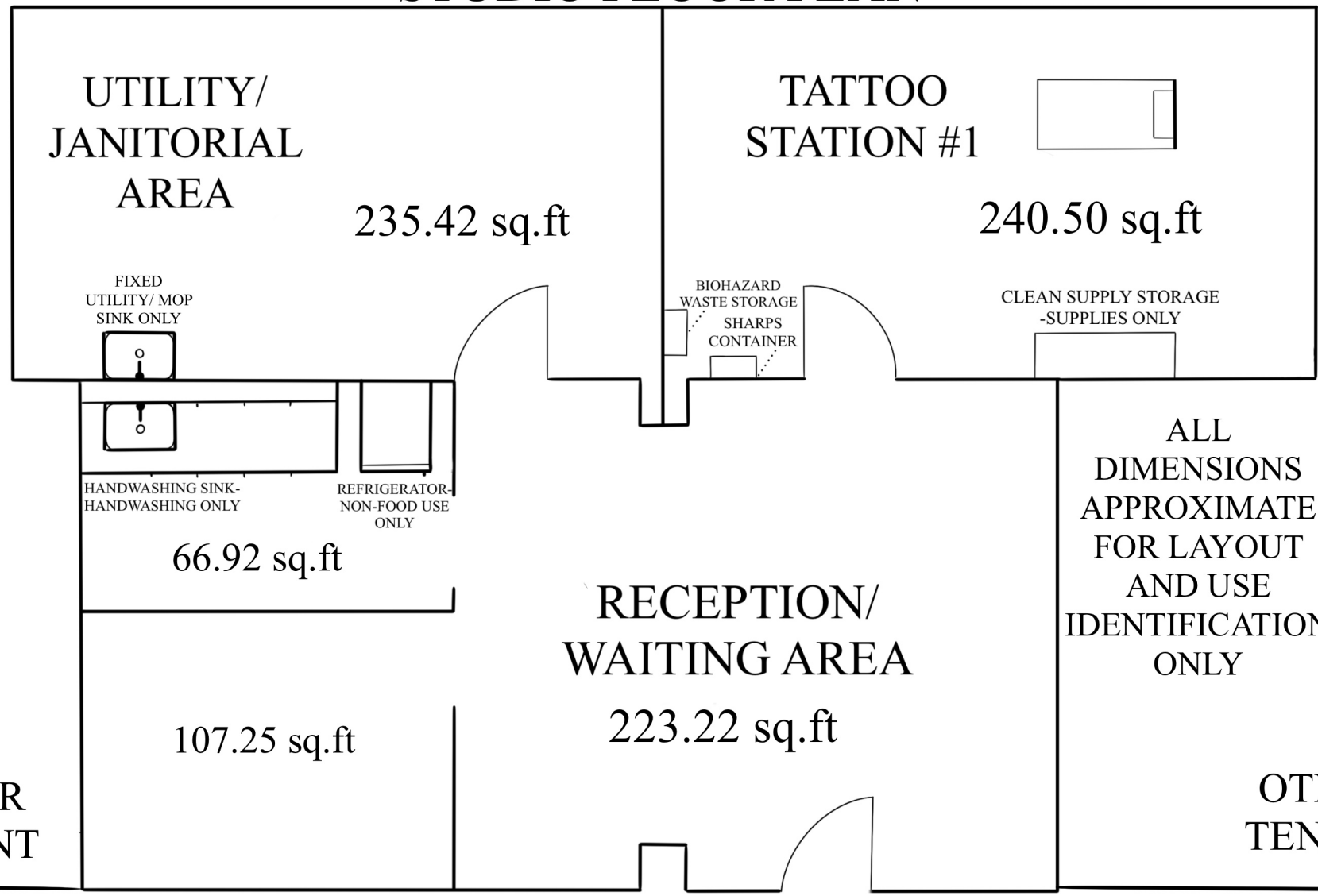
**2026-13, 2026-14, 2026-15**



 = Property in Question  
 = 600' Public Notification Boundary

Legend			
	B-1		R-2
	B-2		I-TA
	B-3		R-2A
	I-1		I-TC
	I-2		R-3
	I-T		R-1
			R-1A
			R-1B
			R-4
			R-5
			R-B

# 81 N. CHICAGO STREET INKEVERYTHING TATTOO STUDIO FLOOR PLAN



ALL DIMENSIONS APPROXIMATE FOR LAYOUT AND USE IDENTIFICATION ONLY

OTHER TENANT

OTHER TENANT

PUBLIC RESTROOMS

COMMON HALLWAY

EXIT TO COMMON HALLWAY

STAIRWELL

ELEVATOR

To the City of Joliet,

My name is Joseph Spillie, and I am a professional tattoo artist proposing the opening of Ink Everything Tattoo Studio, a private, appointment-only tattoo studio located at 81 North Chicago Street in Joliet, Illinois. This studio is being created with a very intentional approach that is unlike any other tattoo studio currently in existence.

I was born and raised in Joliet so opening this studio here is deeply personal to me. Ink Everything Tattoo Studio is not a traditional tattoo shop and is not designed to operate as a walk-in or high-volume business. If allowed, it will serve as a quiet, professional art studio focused on quality, safety, privacy, and respect for my clients and the surrounding community.

The studio will operate by appointment only, with one appointment per day, scheduled in the early morning hours. An appointment that clients are booked months in advance for. There will be no additional artists, or dual services. There will be no walk-in traffic, no overlapping clients, and no group activity. This model allows me to focus on the client and maintain a calm, controlled

environment with minimal impact on the neighboring community.

All studio operations will fully comply with and exceed all City of Joliet, Will County Health Department, and State of Illinois regulations. Cleanliness, sanitation, and safety are essential to how I work, and the limited schedule of clients per day allows for careful sterilization, proper procedures, and regulatory compliances already passed by the Health department.

This is especially important to Joliet, as the city currently does not have other locally rooted private tattoos studios operating in this way. It will not only allow the ability for locals to gain permanent artwork in a private, clean environment, but will also allow people from outside the city to experience the surrounding businesses during their visit as well.

Beyond the studio itself, I am committed to giving back to the community that raised me. I plan to support the businesses around me and invest in the community specifically with the idea to establish a small scholarship program at Joliet Central, the school where I started art, to support students interested in art and creative trades.

Ink Everything Tattoo Studio represents a low-impact, responsibly operated, community-focused business. One that will hopefully inspire others in Joliet to pursue art in a positive way. My goal is to build something meaningful in the city and present an incredibly unique tattoo experience for clients that reflects positively on Joliet. I am committed to complying with all the cities regulations while maintaining a peaceful presence that's active in the community. I appreciate your time and consideration and look forward to working with the city of Joliet to bring this studio to life.



# Zoning Board of Appeals Application Packet

## Special Use Permit

This packet should contain all of the following documents:

- Application;
- Ownership disclosure form;
- Public notice sign posting requirements and sign template

If you have any questions please contact the Planning Division staff.

**Joliet Planning Division** - 150 West Jefferson Street,  
First Floor-South Wing, Joliet, Illinois 60432

**Phone Number:** (815) 724-4050

**Email Address:** [zoning@joliet.gov](mailto:zoning@joliet.gov)

FOR OFFICE USE ONLY

\*\*\*Verified by Planner (please initial): \_\_\_\_\_\*\*\*

Payment received from:

Petition #: \_\_\_\_\_

Common Address: \_\_\_\_\_

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

Meeting date requested: \_\_\_\_\_

ZONING BOARD OF APPEALS  
JOLIET, ILLINOIS

**PETITION FOR SPECIAL USE PERMIT**

City of Joliet Planning Division, 150 W. Jefferson St., First Floor, South Wing, Joliet, IL 60432  
Phone (815)724-4050 Fax (815)724-4056

ADDRESS FOR WHICH SPECIAL USE IS REQUESTED: 81 north Chicago street

PETITIONER'S NAME: Joseph spillie

HOME ADDRESS: [REDACTED] ZIP CODE: 60450

BUSINESS ADDRESS: 81 North Chicago street ZIP CODE: 60450

PHONE: (Primary) [REDACTED] (Secondary) \_\_\_\_\_

EMAIL ADDRESS: [REDACTED] FAX: N/a

PROPERTY INTEREST OF PETITIONER: Tenant

OWNER OF PROPERTY: [REDACTED]

HOME ADDRESS: N/a ZIP CODE: \_\_\_\_\_

BUSINESS ADDRESS: 81 North chicago street ZIP CODE: 60432

EMAIL ADDRESS: [REDACTED] FAX: [REDACTED]

**Any use requiring a business license shall concurrently apply for a business license and submit a copy with this petition. Additionally, if this request is for operation of a business, please provide the following information:**

BUSINESS REFERENCES (name, address, phone):

[REDACTED]  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER PROJECTS AND/OR DEVELOPMENTS:

No current developments  
\_\_\_\_\_  
\_\_\_\_\_

PERMANENT INDEX NUMBER (TAX NO. OR P. I. N.): 30-07-09-443-010 ;  
\_\_\_\_\_ ; \_\_\_\_\_ ; \_\_\_\_\_ .

*\*\*Property Index Number/P.I.N. can be found on tax bill or Will County Supervisor of Assessments website\*\**

LEGAL DESCRIPTION OF PROPERTY (attached copy preferred):  
LOT 4, 5 6 BLOCK 21 IN JOEL S MATHEWSONS SUB OF LOTS 7 8, IN THE OLD TOWN OF  
JOLIET, SD SUB BEING PRT OF THE E1/2 OF THE SE

LOT SIZE: WIDTH: N/a DEPTH: N/a AREA : .09 ac

PRESENT USE(S) OF PROPERTY: No current use

PRESENT ZONING OF PROPERTY: B2 district

SPECIAL USE REQUESTED: to allow a private, appointment-only tattoo studio

The Zoning Board of Appeals is authorized to grant a special use permit provided the applicant establishes by clear and convincing evidence:

- (1) That the establishment, maintenance, or operation of the special use will not be detrimental to or endanger the public health, safety, morals, comfort, or general welfare; and
- (2) That the special use will not be injurious to the use and enjoyment of other property in the immediate vicinity for the purposes already permitted, nor substantially diminish and impair property values within the neighborhood; and
- (3) That the establishment of the special use will not impede the normal and orderly development and improvement of surrounding property for uses permitted in the district; and
- (4) That adequate utilities, access roads, drainage, and/or other necessary facilities have been or will be provided; and
- (5) That adequate measures have been or will be taken to provide ingress and egress so designed as to minimize traffic congestion in the public streets; and
- (6) That the special use shall in all other respects conform to the applicable land use regulations of the district in which it is located and shall not be in violation of any other applicable law, ordinance or regulation; and
- (7) At least one (1) year has elapsed since any denial of any prior application for a special use permit that would have authorized substantially the same as all or part of the sites, unless conditions in the area have substantially changed.

Please describe how this request meets the criteria by responding to the following questions in your own words.

1. How will the establishment, maintenance, or operation of the special use affect the public health, safety, morals, comfort, or general welfare?

The presented establishment will only improve the general welfare of the surrounding area. The establishment will be private, and generate low traffic while encouraging a safe practice that encourages a safe, comforting community.

2. How will the special use impact properties in the immediate area? The surrounding business will gain customers/ clientele and the immediate area will be positively affected from proposed events and community based support that is being planned by the business. It also will allow a unique business that will finally be obtainable to those living in the community.

3. Will the use impede the normal/orderly development/improvement of surrounding property? The use of the proposed establishment will not impede and will go almost unnoticeable from a visual or dynamic standpoint and will only be noticed through community collaborative effort to better the city.

4. Are adequate utilities, access roads, drainage, and/or other necessary facilities provided? Yes, all of the appropriate state and city regulations along with health department regulations are being followed along with adequate roads for parking.

5. Have adequate measures been taken to provide ingress/egress design to minimize traffic congestion in public streets? Yes, the proposed business will be appointment only and private and will only attract up to one client per day.

6. Does the use conform to the applicable land use regulations of the district in which it is located and does it violate any other applicable law, ordinance or regulation? Yes, the only non conformity is that it is a B-3 business proposed to open in a B-2 district

7. Has at least one (1) year elapsed since any denial of any prior application for a special use permit that would have authorized substantially the same as all or part of the sites (unless conditions in the area have changed substantially)?

No prior application has been proposed for this address.

**REQUIRED SUPPORTING ATTACHMENTS**

- Site plan / concept plan / floor plan / building elevation plan
- Joliet Ownership Disclosure form
- Business license application (if applicable)

**NOTARIZATION OF PETITION**

STATE OF ILLINOIS) ss  
COUNTY OF WILL)

I, [REDACTED], depose and say that the above statements are true and correct to the best of my knowledge and belief. I agree to be present in person or by representation when this petition is heard before the Zoning Board of Appeals.

[REDACTED]  
*(if other than petitioner)*

Subscribed and sworn to before me  
this 23<sup>rd</sup> day of February, 2026

[REDACTED]



## CITY OF JOLIET OWNERSHIP DISCLOSURE FORM

The City of Joliet requires that applicants for zoning relief, subdivision approval, building permits and business licenses disclose the identity of all persons having an ownership interest in the business and the real property associated with the application. A copy of this form must be completed and submitted with other application materials. Failure to properly complete and submit this form may result in the denial of the application.

### I. INFORMATION ABOUT THE APPLICATION

This form is submitted as part of an application for the following (check all that apply):

- Rezoning, Special Use Permit, Variation, or Other Zoning Relief (Complete Sections II and III)
- Preliminary Plat, Final Plat, or Record Plat of Subdivision (Complete Sections II and III)
- Building Permit (Complete Sections II and III)
- Business License (Complete All Sections)

### II. INFORMATION ABOUT THE PROPERTY

The address and PIN(s) of the real property associated with this application are:

81 North Chicago Street in Joliet

PIN(s): 30-07-09-443-010

### III. PROPERTY OWNERSHIP

Select the type of owner of the real property associated with this application and fill in the appropriate contact information below:

- Individual:** State the names, addresses, and phone #'s of the individual owner(s)
- Corporation:** State the names, addresses, and phone #'s of all persons holding 3% or more of the stock of the corporation and the percentage of shares held by such stockholders
- Limited Liability Company:** State the names, addresses, and phone #'s of all members of the company along with the percentage of ownership held by each member
- Land Trust:** State the names, addresses, and phone #'s of the trustee(s) and all beneficiaries
- Partnership:** State the names, addresses, and phone #'s of all partners
- Other type of organization:** State the names, addresses, and phone #'s of all persons having a legal or equitable ownership interest in the organization or the right to direct the affairs of the organization

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E-MAIL: [REDACTED] FAX: [REDACTED]

**IV. BUSINESS OWNERSHIP**

If the owner of the business is different than the owner of the real property associated with the application, then the following information must be provided:

Select the type of business owner associated with this application and fill in the contact information below:

- Individual:** State the names, addresses, and phone #'s of the individual owner(s)
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- Partnership:** State the names, addresses, and phone #'s of all partners
- Other type of organization:** State the names, addresses, and phone #'s of all persons having a legal or equitable ownership interest in the organization

Joseph Spillie 100% Owner

[REDACTED]

\_\_\_\_\_

E-MAIL [REDACTED] FAX: N/a

**NOTE:**

If a stockholder, member, beneficiary or partner disclosed in Section III or Section IV is not an individual, then the individuals holding the legal or equitable title to the real property or business associated with the application must also be disclosed. For example, if the real property associated with an application is owned by a land trust, and the beneficiary of the land trust is a limited liability company, then the members of the limited liability company must be disclosed. If one of the members of the limited liability company is a partnership, then the identity of the partners must be disclosed. If one of the partners is a corporation, then all persons owning 3% or more of the issued stock must be disclosed.

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

**DATE:** 2/1/2026 \_\_\_\_\_

**Name, Title, and Telephone Numbers of Person Completing and Submitting This Form:**

[REDACTED]

**PRINT**



# Zoning Board of Appeals Application Packet

## Variation

This packet should contain all of the following documents:

- Application;
- Ownership disclosure form;
- Public notice sign posting requirements and sign template

If you have any questions please contact the Planning Division staff.

**Joliet Planning Division** - 150 West Jefferson Street,  
First Floor-South Wing, Joliet, Illinois 60432

**Phone Number:** (815) 724-4050

**Email Address:** [zoning@joliet.gov](mailto:zoning@joliet.gov)

FOR OFFICE USE ONLY

\*\*\*Verified by Planner (please initial): \_\_\_\_\_\*\*\*

Payment received from:

Petition #:

Common Address:

Date filed:

Meeting date assigned:

ZONING BOARD OF APPEALS

JOLIET, ILLINOIS

**PETITION FOR VARIATION/APPEAL**

City of Joliet Planning Division, 150 W. Jefferson St., Joliet, IL 60432

Ph (815)724-4050 Fax (815)724-4056

ADDRESS FOR WHICH VARIATION IS REQUESTED:

PETITIONER'S NAME:

HOME ADDRESS:

ZIP CODE:

BUSINESS ADDRESS:

ZIP CODE:

PHONE: (Primary)

(Secondary)

EMAIL ADDRESS:

FAX:

PROPERTY INTEREST OF PETITIONER:

OWNER OF PROPERTY:

HOME ADDRESS:

ZIP CODE:

BUSINESS ADDRESS:

ZIP CODE:

EMAIL ADDRESS:

FAX:

**Any use requiring a business license shall concurrently apply for a business license and submit a copy with this petition.** Additionally, if this request is for operation of a business, please provide the following information:

BUSINESS REFERENCES (name, address, phone or email):

OTHER PROJECTS AND/OR DEVELOPMENTS:

PERMANENT INDEX NUMBER (TAX NO. OR P. I. N.): \_\_\_\_\_;  
\_\_\_\_\_;

*\*\*Property Index Number/P.I.N. can be found on tax bill or Will County Supervisor of Assessments website\*\**

LEGAL DESCRIPTION OF PROPERTY (an attached copy preferred):

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LOT SIZE: WIDTH: \_\_\_\_\_ DEPTH: \_\_\_\_\_ AREA: \_\_\_\_\_

PRESENT USE(S) OF PROPERTY: \_\_\_\_\_

PRESENT ZONING OF PROPERTY: \_\_\_\_\_

VARIATION/APPEAL REQUESTED: \_\_\_\_\_

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**RESPONSE TO VARIATION CRITERIA**

The Zoning Board of Appeals is authorized to grant or recommend relief only when it has received adequate evidence to establish a practical difficulty or hardship. The evidence must support each of the following three conditions:

- (a) The property in question cannot yield a reasonable return by use permitted and subject to the conditions allowed by the regulations in the particular district or zone.
- (b) The plight of the owner is due to unique circumstances.
- (c) The variation, if granted, will not alter the essential character of the locality.

**Please describe how this request meets the criteria by responding to the following questions in your own words.**

*1. How do the applicable zoning regulations prevent the property in question from yielding a reasonable return?*

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2. What unique circumstances exist which mandate a variance?

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3. What impact would the granting of this variance have upon the essential character of the general area? Please include both positive and negative impacts.

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**REQUIRED SUPPORTING ATTACHMENTS**

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- Joliet Ownership Disclosure form
- Business license application (if applicable)

**NOTARIZATION OF PETITION**

STATE OF ILLINOIS) ss  
COUNTY OF WILL)

I, [REDACTED], depose and say that the above statements are true and correct to the best of my knowledge and belief. I agree to be present in person or by representation when this petition is heard before the Zoning Board of Appeals.

[REDACTED]

[REDACTED]

(If other than petitioner)

Subscribed and sworn to before me  
this 20<sup>th</sup> day of February, 2026

[REDACTED]



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- Business License (Complete All Sections)

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\_\_\_\_\_

PIN(s): \_\_\_\_\_

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- Other type of organization:** State the names, addresses, and phone #'s of all persons having a legal or equitable ownership interest in the organization or the right to direct the affairs of the organization

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

E-MAIL: \_\_\_\_\_ X: \_\_\_\_\_

**IV. BUSINESS OWNERSHIP**

If the owner of the business is different than the owner of the real property associated with the application, then the following information must be provided:

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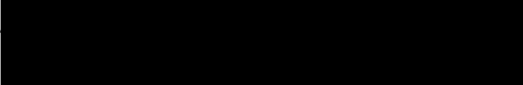
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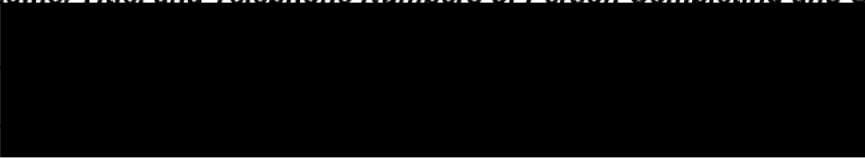
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E-MAIL:  FAX: \_\_\_\_\_

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

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

**Name, Title, and Telephone Numbers of Person Completing and Submitting This Form:**  
 \_\_\_\_\_  
\_\_\_\_\_

**PRINT**



# Zoning Board of Appeals Application Packet

## Variation of Use

This packet should contain all of the following documents:

- Application;
- Ownership disclosure form;
- Public notice sign posting requirements and sign template

If you have any questions please contact the Planning Division staff.

**Joliet Planning Division** - 150 West Jefferson Street,  
First Floor-South Wing, Joliet, Illinois 60432

**Phone Number:** (815) 724-4050

**Email Address:** [zoning@joliet.gov](mailto:zoning@joliet.gov)

FOR OFFICE USE ONLY

\*\*\*Verified by Planner (please initial): \_\_\_\_\_ \*\*\*

Payment received from:

Petition #: \_\_\_\_\_

Common Address: \_\_\_\_\_

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

Meeting date assigned: \_\_\_\_\_

ZONING BOARD OF APPEALS  
JOLIET, ILLINOIS

**PETITION FOR VARIATION OF USE**

City of Joliet Planning Division, 150 W. Jefferson St., Joliet, IL 60432  
Ph (815)724-4050 Fax (815)724-4056

ADDRESS FOR WHICH VARIATION IS REQUESTED: 81 North Chicago Street

PETITIONER'S NAME: \_\_\_\_\_

HOME ADDRESS: \_\_\_\_\_ ZIP CODE: 60450

BUSINESS ADDRESS: \_\_\_\_\_ ZIP CODE: 60432

PHONE: (Primary) \_\_\_\_\_ (Secondary) n/a

EMAIL ADDRESS: \_\_\_\_\_ FAX: n/a

PROPERTY INTEREST OF PETITIONER: Tenant

OWNER OF PROPERTY: \_\_\_\_\_

HOME ADDRESS: n/a ZIP CODE: n/a

BUSINESS ADDRESS: 81 North Chicago Street ZIP CODE: 60432

EMAIL ADDRESS: \_\_\_\_\_ FAX: \_\_\_\_\_

**Any use requiring a business license shall concurrently apply for a business license and submit a copy with this petition. Additionally, if this request is for operation of a business, please provide the following information:**

BUSINESS REFERENCES (name, address, phone or email):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

OTHER PROJECTS AND/OR DEVELOPMENTS:

no current developments

\_\_\_\_\_

\_\_\_\_\_

PERMANENT INDEX NUMBER (TAX NO. OR P. I. N.): 30-07-04-443-D10-D000 ;  
\_\_\_\_\_ ; \_\_\_\_\_ ; \_\_\_\_\_

*\*\*Property Index Number/P.I.N. can be found on tax bill or Will County Supervisor of Assessments website\*\**

LEGAL DESCRIPTION OF PROPERTY (an attached copy preferred):

LOT 4, 5 6 BLOCK 21 IN JOEL S MATHEWSONS SUB OF  
LOTS 7 8, IN THE OLD TOWN OF JOLIET, SD SUB BEING  
PRT OF THE E 1/2 OF THE SE

LOT SIZE: WIDTH: n/a DEPTH: n/a AREA: .09 AC

PRESENT USE(S) OF PROPERTY: No current use

PRESENT ZONING OF PROPERTY: B-2 (central business)

VARIATION OF USE REQUESTED: Variation of use to allow B-3 (general  
business) use in a B-2 district

### **RESPONSE TO VARIATION OF USE CRITERIA**

The Zoning Board of Appeals is authorized to grant or recommend relief only when it has received adequate evidence to establish a practical difficulty or hardship. The evidence must support each of the following three conditions:

- (a) The property in question cannot yield a reasonable return by use permitted and subject to the conditions allowed by the regulations in the particular district or zone.
- (b) The plight of the owner is due to unique circumstances.
- (c) The variation, if granted, will not alter the essential character of the locality.

**Please describe how this request meets the criteria by responding to the following questions in your own words.**

*1. How do the applicable zoning regulations prevent the property in question from yielding a reasonable return?*

The current zoning is a B-2 district which doesn't currently  
allow my proposed B-3 business.

2. What unique circumstances exist which mandate a variance?

The district is B2 zoning. The proposed private studio (B-3) is unique in the way it generates minimal traffic and is appropriate for this location.

3. What impact would the granting of this variance have upon the essential character of the general area? Please include both positive and negative impacts.

The proposed use will have no negative impact on the surrounding area. The appointment only, private studio will generate minimal traffic, noise, and activity and is consistent with surrounding commercial uses.

**REQUIRED SUPPORTING ATTACHMENTS**

- Site plan / concept plan / floor plan / building elevation plan
- Joliet Ownership Disclosure form
- Business license application (if applicable)

**NOTARIZATION OF PETITION**

STATE OF ILLINOIS) ss  
COUNTY OF WILL)

I, [redacted], depose and say that the above statements are true and correct to the best of my knowledge and belief. I agree to be present in person or by representation when this petition is heard before the Zoning Board of Appeals.

[redacted]  
\_\_\_\_\_  
Petitioner's Signature

[redacted]  
\_\_\_\_\_  
(If other than petitioner)

Subscribed and sworn to before me  
this 26<sup>th</sup> day of February, 2026

[redacted]



## CITY OF JOLIET OWNERSHIP DISCLOSURE FORM

The City of Joliet requires that applicants for zoning relief, subdivision approval, building permits and business licenses disclose the identity of all persons having an ownership interest in the business and the real property associated with the application. A copy of this form must be completed and submitted with other application materials. Failure to properly complete and submit this form may result in the denial of the application.

### I. INFORMATION ABOUT THE APPLICATION

This form is submitted as part of an application for the following (check all that apply):

- Rezoning, Special Use Permit, Variation, or Other Zoning Relief (Complete Sections II and III)
- Preliminary Plat, Final Plat, or Record Plat of Subdivision (Complete Sections II and III)
- Building Permit (Complete Sections II and III)
- Business License (Complete All Sections)

### II. INFORMATION ABOUT THE PROPERTY

The address and PIN(s) of the real property associated with this application are:

81 North Chicago Street  
 PIN(s): 30-07-09-443-010

### III. PROPERTY OWNERSHIP

Select the type of owner of the real property associated with this application and fill in the appropriate contact information below:

- Individual:** State the names, addresses, and phone #'s of the individual owner(s)
- Corporation:** State the names, addresses, and phone #'s of all persons holding 3% or more of the stock of the corporation and the percentage of shares held by such stockholders
- Limited Liability Company:** State the names, addresses, and phone #'s of all members of the company along with the percentage of ownership held by each member
- Land Trust:** State the names, addresses, and phone #'s of the trustee(s) and all beneficiaries
- Partnership:** State the names, addresses, and phone #'s of all partners
- Other type of organization:** State the names, addresses, and phone #'s of all persons having a legal or equitable ownership interest in the organization or the right to direct the affairs of the organization

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E-MAIL:  FAX:

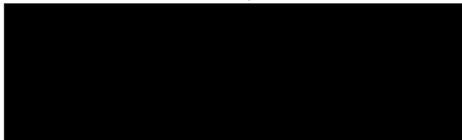
**IV. BUSINESS OWNERSHIP**

If the owner of the business is different than the owner of the real property associated with the application, then the following information must be provided:

Select the type of business owner associated with this application and fill in the contact information below:

- Individual:** State the names, addresses, and phone #'s of the individual owner(s)
- Corporation:** State the names, addresses, and phone #'s of all persons holding 3% or more of the stock of the corporation and the percentage of shares held by such stockholders
- Limited Liability Company:** State the names, addresses, and phone #'s of all members of the company along with the percentage of ownership held by each member
- Partnership:** State the names, addresses, and phone #'s of all partners
- Other type of organization:** State the names, addresses, and phone #'s of all persons having a legal or equitable ownership interest in the organization

Joseph Spillie 100% ownership



E-MAIL: [Redacted] FAX: \_\_\_\_\_

**NOTE:**

If a stockholder, member, beneficiary or partner disclosed in Section III or Section IV is not an individual, then the individuals holding the legal or equitable title to the real property or business associated with the application must also be disclosed. For example, if the real property associated with an application is owned by a land trust, and the beneficiary of the land trust is a limited liability company, then the members of the limited liability company must be disclosed. If one of the members of the limited liability company is a partnership, then the identity of the partners must be disclosed. If one of the partners is a corporation, then all persons owning 3% or more of the issued stock must be disclosed.

**SIGNED:** [Redacted Signature]

**DATE:** 2.1.26

**Name, Title, and Telephone Numbers of Person Completing and Submitting This Form:**

Joseph Spillie, business owner



**PRINT**

**ZONING BOARD OF APPEALS**  
**CRITERIA FOR SPECIAL USES**

Section 47-5.2 (C) of the Zoning Ordinance states:

*A special use permit shall not be granted unless the applicant establishes by clear and convincing evidence:*

	Does the evidence presented sustain this criteria?	Comments
(1) That the establishment, maintenance or operation of the special use will not be detrimental to or endanger the public health, safety, morals, comfort, or general welfare; and		
(2) That the special use will not be injurious to the use and enjoyment of other property in the immediate vicinity for the purposes already permitted, nor substantially diminish and impair property values within the neighborhood; and		
(3) That the establishment of the special use will not impede the normal and orderly development and improvement of surrounding property for uses permitted in the district; and		
(4) That adequate utilities, access roads, drainage, and/or other necessary facilities have been or will be provided; and		
(5) That adequate measures have been or will be taken to provide ingress and egress so designed as to minimize traffic congestion in the public streets; and		
(6) That the special use shall in all other respects conform to the applicable land use regulations of the district in which it is located and shall not be in violation of any other applicable law, ordinance or regulation; and		
(7) At least one (1) year has elapsed since any denial of any prior application for a special use permit that would have authorized substantially the same as all or part of the sites, unless conditions in the area have substantially changed.		

**ZONING BOARD OF APPEALS**  
**CRITERIA FOR VARIATIONS**

Section 47-19.8 of the Zoning Ordinance states:

A variation shall not be granted in any case unless the Board shall find and clearly state in its record of the case that:

	Does the evidence presented sustain this criteria?	Comments
<p>(1) Reasons sustaining the contention that strict enforcement of the Ordinance would involve practical difficulties or impose exceptional hardship were found as follows:</p> <p>(a) _____</p> <p>(b) _____</p> <p>(c) _____</p> <p>(list of reasons)</p>		
<p>(2) Adequate evidence was submitted to establish practical difficulties or particular hardship so that, in the judgment of the Board, a variation is permitted because the evidence sustained the existence of each of the three following conditions:</p> <p>(a) The property in question cannot yield a reasonable return if permitted to be used only under the conditions allowed by the regulations in the particular district or zone.</p> <p>(b) The plight of the owner is due to unique circumstances.</p> <p>(c) The variation, if granted, will not alter the essential character of the locality.</p>		
<p>(3) A public hearing was held on such variation of which at least 15 days and not more than 30 days notice was published in the _____ (name of newspaper) on _____ (date).</p>		