

STAFF REPORT

DATE: July 16, 2026
TO: Zoning Board of Appeals
FROM: Ray Heitner, Planner
RE: Petition Number: 2026-30
Applicant: Savanna Wilhelmi
Status of Applicant: Future Tenant
Owner: 26 W. Clinton Street Building LLC
Location: 124 N. Ottawa Street
Request: A Special Use Permit to allow a resale boutique within an existing tenant space

Purpose

The applicant is requesting a Special Use Permit to allow a resale boutique within an existing tenant space located at 124 N. Ottawa Street. The City Council makes the final decision on this Special Use Permit request upon the recommendation of the Zoning Board of Appeals.

Site Specific Information

The four-story brick building sits at the southeast corner of Ottawa and Clinton Streets on a ¼ acre lot. The circa 1909 mixed use building was built for Hobbs' family who ran the Hobbs Hotel for many years after which it became known as the Hotel Plaza. The proposed business will occupy one ground floor tenant space in this building at 124 N. Ottawa Street, which is at the southeast corner of Ottawa and Clinton Streets.

Surrounding Zoning, Land Use and Character

This property as well as all properties in the general vicinity are zoned B-2 (Central Business District). This is a mixed-use building that is surrounded by a mix of uses that include retail, office, food and beverage service, banking and residential.

Applicable Regulations

- Section 47-12.2A Special Uses – B-2 (Central Business) District
- Section 47-5.2(C) Special Use Permit Criteria

Discussion

The applicant seeks to open a resale boutique, to be known as Maison Maryanna, that would feature secondhand merchandise including, apparel, bridal wear, tuxedo rental, special occasion wear, accessories, jewelry, home accents, and giftable keepsakes. Hours of operation for the business are still being finalized, but the applicant has expressed interest in staying open while Downtown events occur during nighttime and weekend hours.

The City requires a Special Use Permit for businesses where the majority of the merchandise is second-hand.

Recommended Action

Staff recommend the Zoning Board of Appeals recommend approval of the Special Use Permit to allow a resale boutique within an existing tenant space, located at 124 N. Ottawa Street. The business would be situated within an existing mixed-use building that has hosted comparable retail businesses over the years. Staff has no reason to believe the proposed business will produce negative public health, safety, or welfare issues or would impede normal and orderly development of surrounding properties in any way.

Conditions

If the Zoning Board of Appeals desires to recommend approval of this Special Use Permit request, staff recommends the following conditions be included:

1. That the Special Use granted shall herein terminate and lapse unless a building permit or certificate of occupancy is obtained not later than 180 days of the effective date of this ordinance and the erection or alteration of a building is started or the use is commenced within such period. The Board may grant an extension of this period, valid for no more than one hundred and eighty (180) additional days, upon written application and good cause shown without notice or hearing. Whether or not there is an intention to abandon the Special Use, if any special use is discontinued for a continuous period of one year, or if an intent to abandon the Special Use is evident in a shorter period of time, the Special Use for such use shall become void, and such use shall not thereafter be reestablished unless a new Special Use Permit is obtained; and
2. Should the property be declared a public nuisance, it shall be subject to a rehearing and a possible revocation of the Special Use Permit.

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: 124 N. Ottawa St. Joliet Illinois

PETITIONER'S NAME: Savanna Wilhelmi

HOME ADDRESS: 414 Buell Ave. Joliet Illinois ZIP CODE: 60435

BUSINESS ADDRESS: 124 N. Ottawa St. Joliet IL ZIP CODE: 60432

PHONE: (Primary) [REDACTED] (Secondary) N/A

EMAIL ADDRESS: [REDACTED] N/A

PROPERTY INTEREST OF PETITIONER: 0

OWNER OF PROPERTY: 26 W. Clinton St. Building LLC

HOME ADDRESS: P.O. Box 306 Kenilworth Illinois ZIP CODE: 60043

BUSINESS ADDRESS: 124 N. Ottawa St. Joliet Illinois ZIP CODE: 60432

EMAIL ADDRESS: N/A FAX: N/A

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):

Maison Maryanna
124 N. Ottawa St. Joliet Illinois 60432

OTHER PROJECTS AND/OR DEVELOPMENTS:

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

PIN: 30-07-09439001,0000.

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 1 Block 20 in the Original town of plot of the East 1/2, of the SE 1/4 of 9, T35N - R10E

LOT SIZE: WIDTH: DEPTH: AREA:

PRESENT USE(S) OF PROPERTY: Commercial Rentals

PRESENT ZONING OF PROPERTY: DO60 Commercial

SPECIAL USE REQUESTED: for operations of a resale boutique

(Maison Maryanna) featuring secondhand merchandise including, apparel, Bridal, and Special Occasion Wear, accessories, jewelry, home accents, giftable keepsakes.

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?

Positive impact on Community by providing a Clean, Professionally operated retail Boutique offering Curated Resale items. The Boutique will contribute to the Vitality and appearance of downtown Joliet.

2. How will the special use impact properties in the immediate area? The proposed use is Compatible with Surrounding Commercial properties and will have a positive impact on neighboring businesses by increasing foot traffic.

3. Will the use impede the normal/orderly development/improvement of surrounding property?

No, the boutique will occupy an existing storefront and will not interfere with the development, improvement or operations of surrounding properties.

4. Are adequate utilities, access roads, drainage, and/or other necessary facilities provided?

Yes, the property is an existing commercial building with adequate utilities, public access, drainage to support use.

5. Have adequate measures been taken to provide ingress/egress design to minimize traffic congestion in public streets?

Yes, customers will utilize existing public streets, sidewalks and parking facilities serving downtown area.

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 proposed use will be in compliance with all federal, state and local laws.

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 special use permit has been issued.

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)

[REDACTED]

depose and say that the above statements are true and correct to the best of
e present in person or by representation when this petition is heard before

the Zoning Board of Appea [REDACTED]

[REDACTED]

Petitioner's S [REDACTED]

[REDACTED]

Owner's Signature
(If other than petitioner)

Subscribed and sworn to before me

this 1 day of June, 2026

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

Savanna A. Wilhelm

414 Buell Ave Joliet Illinois 60435

E-MAIL

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: 6/1/26

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

Savanna Wilhelm, Owner,

PRINT

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:

124 N. Ottawa St. Joliet Illinois, 60432
PIN(s): 30-07-09 439-001-0000

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

26 N. Clinton Building LLC.
P.O. Box 306 Kenilworth Illinois, 60043

E-MAIL: N/A FAX: N/A



2026 ANTIQUE DEALERS, PAWN BROKERS AND SECOND HAND DEALERS BUSINESS LICENSE APPLICATION

Office of the City Clerk - Business Services

150 West Jefferson Street

Joliet, Illinois 60432

Office 815-724-3905 Fax 815-724-3904

Email: businessservices@joliet.gov Website: <http://www.joliet.gov>

Office Use Only:

Date Received: _____

Date Issued: _____

Business Account ID: _____

Please print legibly. All information and supplemental requirements must be completed and submitted. **Incomplete forms will be returned.** Please allow a *minimum* of twenty (20) business days for process and review prior to opening.

Proposed Opening Date: 8/1/2024

Date Opened: _____

LOCAL BUSINESS INFORMATION

Business Name (DBA): Maison Maryanna Store Number: _____

Business Address: 124 N. Ottawa St Joliet IL

City: Joliet State: IL Zip Code: 60432

Business Phone Number: [REDACTED] Fax Number: N/A

Location Manager/Supervisor Name: Savanna Wilhelmi

Cell Phone Number: [REDACTED] E-mail Address: [REDACTED]

CORPORATE/ BUSINESS OWNERSHIP INFORMATION

Corporate Name: Maison Maryanna

Contact Name: Savanna Wilhelmi

Corporate Address: 124 N. Ottawa St

City: Joliet State: ILLINOIS Zip Code: 60432

Phone Number: [REDACTED] Fax Number: N/A

E-mail Address: [REDACTED] Website: _____

Federal Employee Identification Number (FEIN Submit IRS Dept. of Treasury Authorization): [REDACTED]

State of Illinois Business Tax Number (IBT - Submit IDOR Certificate of Registration): [REDACTED]

Mailing address for all correspondence: Local Business: ☒ Corporate: ☐

BUSINESS OWNERSHIP INFORMATION

Provide the following information regarding how the business was created and is owned:

☒ Individual ☐ Partnership ☐ Limited Liability Corporation (LLC) ☐ Private Limited Company (LTD) ☐ Corporation

List all owner(s) information below and add a second sheet if necessary:

Name: Savanna Wilhelm Title: Joliet 24/owner
Home Address: 414 Buell Ave
City: Joliet State: IL Zip Code: 60435
Cell #: [REDACTED] Email: [REDACTED] 100

Name: _____ Title: _____
Home Address: _____
City: _____ State: _____ Zip Code: _____
Cell #: _____ Email: _____ % of Ownership: _____

Name: _____ Title: _____
Home Address: _____
City: _____ State: _____ Zip Code: _____
Cell #: _____ Email: _____ % of Ownership: _____

Name: _____ Title: _____
Home Address: _____
City: _____ State: _____ Zip Code: _____
Cell #: _____ Email: _____ % of Ownership: _____

I hereby certify that the information provided in this application is true and correct to the best of my knowledge and that I have not provided false or misleading information. I understand that the failure to supply adequate or correct information will be subject to suspension or revocation of the City of Joliet business license.

Savanna Wilhelm
Name of applicant (print)
Owner
Title of applicant

[REDACTED]
Signature
6/1/20
Date

BUSINESS OPERATION INFORMATION

BARTER, PAWNED, PURCHASE, SALE OR TRADE OF SECONDHAND ITEMS

Select the category or categories which best explain the general description/purpose of business:

- | | | |
|--|---|---|
| ☒ Antique dealer | ☐ A/V equipment, gaming devices | ☒ Consignment store |
| ☐ Coin dealer | ☐ Automobile and/or parts resale | ☐ Pawn broker/shop |
| ☐ Junk/Salvage yard | ☐ Charity store (donated goods for resale) | ☐ Weapons |
| ☐ Jewelry/Gold store | ☐ Furniture/Household items | ☐ Cell Phones |

Other, explain: Resale boutique specializing in clothing, Bridal, accessories, home decor, keepsakes, New and second hand merchandise.

The approximate percentage of business associated with the buying and selling of used merchandise: %

Gross Square Footage of Tenant Space at Location: 650 Sqft

Total Number of Employees at Location (include family members): 1

Days of Week and Hours of Operation at Location: Consistent with downtown events, travelers.

Do you want the local business information listed on the City of Joliet's website? Yes ☒ No ☐

Is the Business Located in a Stand-Alone Structure? Yes ☐ No ☒

If no, name of center:

26 W. Clinton Building

Does the Business Own the Building? Yes ☐ No ☒ If no, complete the following:

Owner Name:

26 W. Clinton Building LLC.

Owner Address:

P.O. Box 306 Kenilworth Illinois

City:

Kenilworth

State:

IL

Zip Code:

60045

Cell Phone Number:

N/A

Are Hazardous Materials Stored on Site? Yes ☐ No ☒ If yes, provide MSD Sheets to the Joliet Fire Department

Does the Business have an Alarm System? Yes ☐ No ☒ If yes, must register with the Joliet Police Department

Name of Alarm System Monitoring Company:

N/A

Are there food and/or beverage vending machines or gaming/amusement machines or market pantries on the property? Yes ☐ No ☒

If yes, the "Coin Operated Vending, Amusement and Gaming Devices Business License Application" must be completed and all machines must have individual annual stickers – List vending information below:

Vending Company:

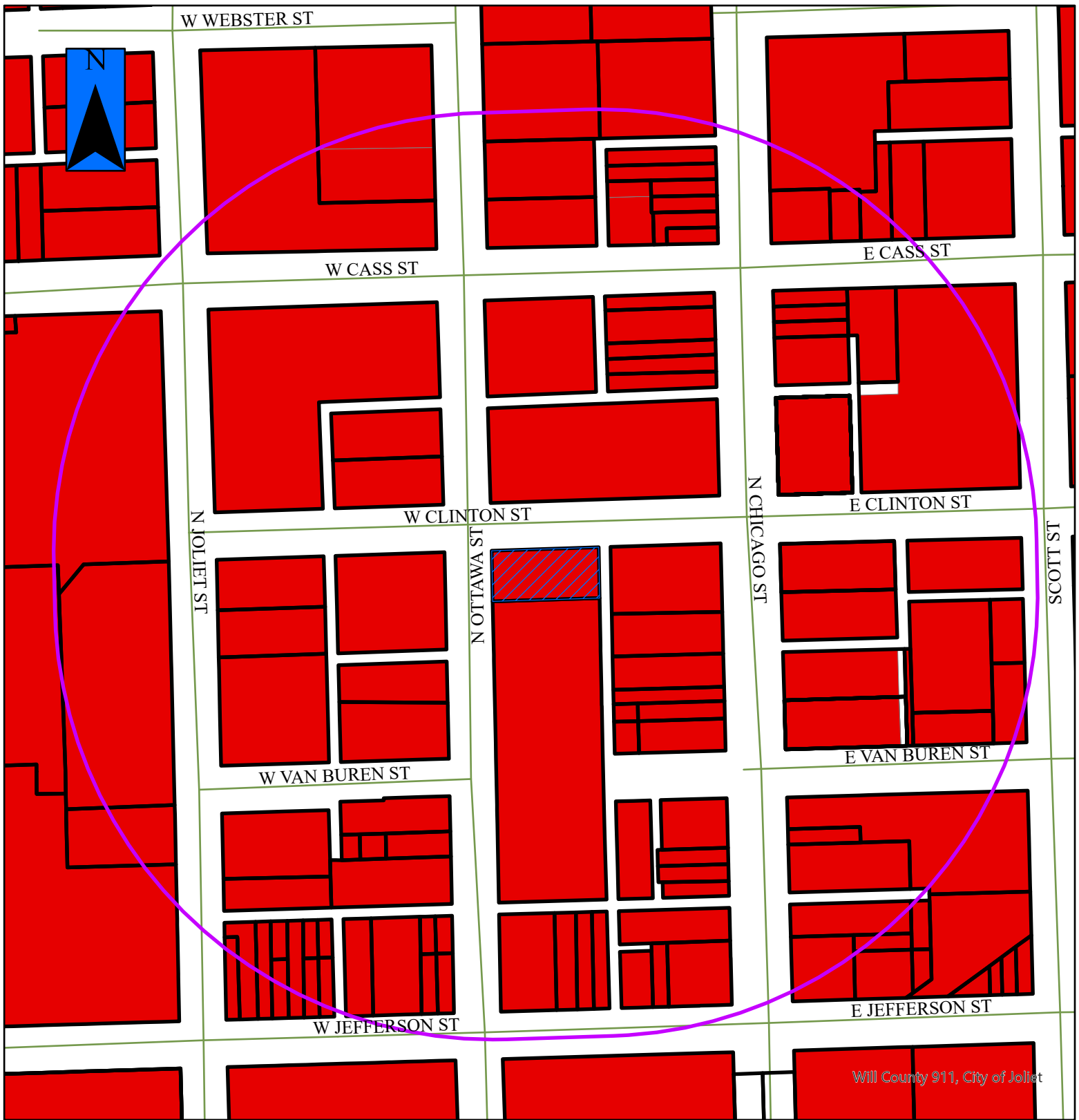
N/A

Office Phone#:

N/A







2026-30



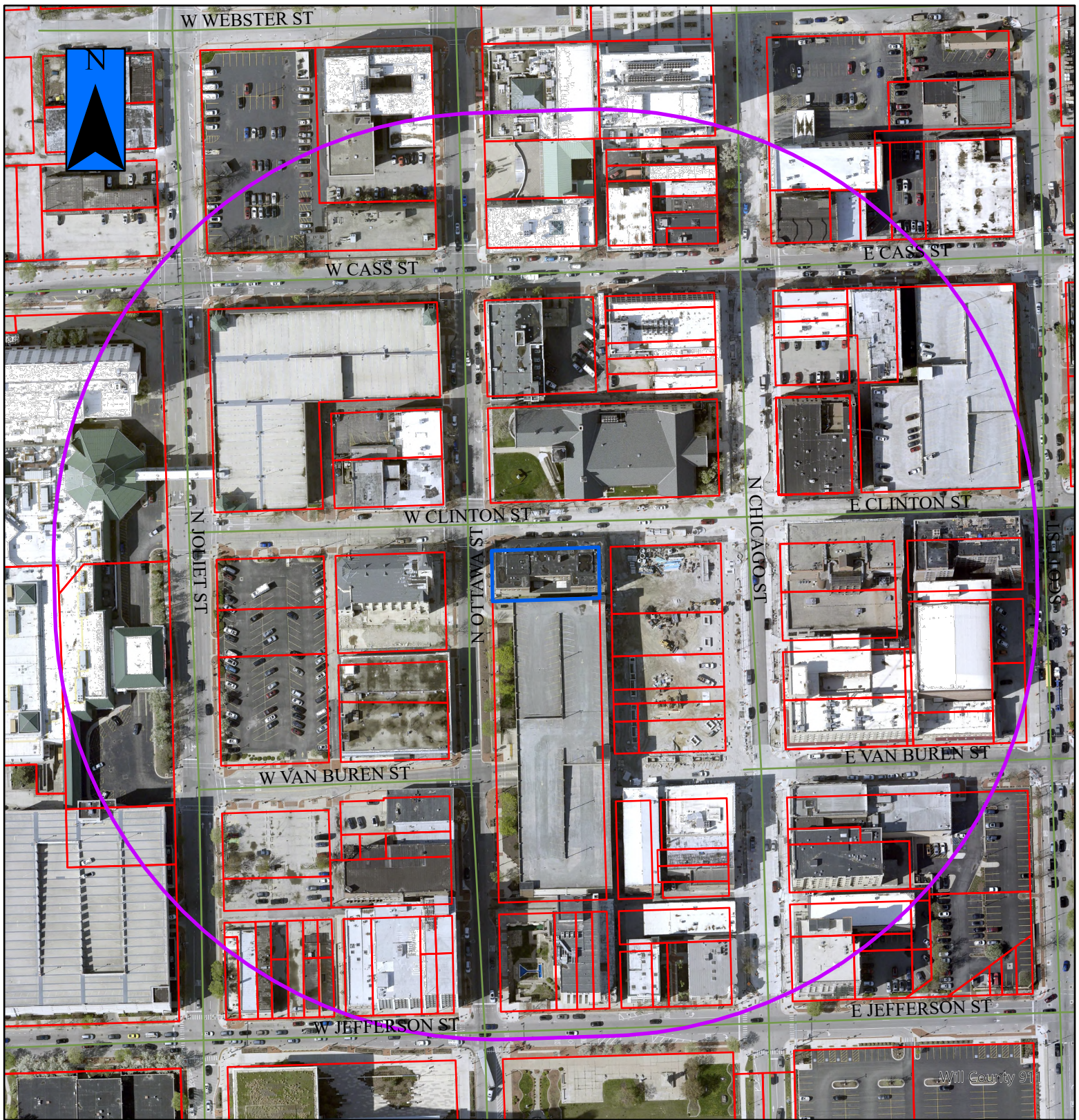
= Property in Question



= 600' Public Notification Boundary

Legend

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



2026-30a



- = Property in Question / Propiedad en cuestión
- = 600' Public Notification Boundary /
Límite de notificación pública de 600 ft (180 m)