

STATE OF ILLINOIS )

) SS.

COUNTY OF WILL )

BEFORE THE MAYOR AND CITY COUNCIL  
OF THE CITY OF JOLIET, ILLINOISPETITION FOR ANNEXATION TO THE CITY OF JOLIET

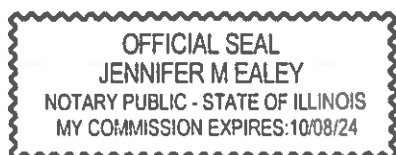
Pursuant to Section 7-1-8 of the Illinois Municipal Code, the undersigned being duly sworn, states on oath as follows:

1. The undersigned is duly authorized by law to execute and file this Petition for Annexation.
2. The undersigned is the owner of record of all of the land within the territory described in Exhibit "A" ("Territory"), attached hereto and incorporated herein by reference.
3. The undersigned constitutes at least 51% of the electors residing within the Territory, if any.
4. The Territory is not within the corporate limits of any municipality.
5. The undersigned requests the annexation of the Territory to the City of Joliet, Illinois, together with that portion of any highway adjoining the Territory, which is not within any municipality.

DATE: 06/16/22
  
 JOAN SCHAEFER, PETITIONER & Elector

  
 Larry Williams, Elector

Subscribed and Sworn to before me  
 this 16th day of June, 2022.

  
 NOTARY PUBLIC


CHRISTA M. DESIDERIO  
 CITY CLERK  
 JOLIET, ILLINOIS

22 JUN 20 PM 1:23

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CASE NO. A8-22  
DATE FILED 6/17/22

ANNEXATION INFORMATION SHEET

(PLEASE PRINT CLEARLY)

**I. Applicant's information:**

NAME OF APPLICANT(S):

<u>Joan</u>	<u>Schaefer</u>		
FN	(MI)	(LN)	(Suffix)
<u>2749</u>	<u>Golf Road</u>	<u>Joliet</u>	<u>IL</u>
HOME ADDRESS (include Suite, Apt. No.)	CITY	STATE	ZIP CODE
<u>60432</u>			
BUSINESS ADDRESS	CITY	STATE	ZIP CODE

CONTACT NUMBERS:

(H) (928) 377-0710 (W) ( ) CELL ( )

E-MAIL ADDRESS:

**II. Owner's information:**

NAME OF OWNER(S): (If property ownership is in the name of a partnership, corporation, joint venture, trust or other entity, please list the official name of the entity and the name of the managing power.)

<u>BMO Harris Bank</u>	<u>Trust Number 1078</u>		
FN	(MI)	(LN)	(Suffix)
<u>78 N. Chicago Street</u>	<u>Joliet</u>	<u>IL</u>	<u>60432</u>
HOME ADDRESS (include Suite, Apt. No.)	CITY	STATE	ZIP CODE
BUSINESS ADDRESS	CITY	STATE	ZIP CODE

CONTACT NUMBERS:

(H) ( ) (W) ( ) CELL ( )

E-MAIL ADDRESS:

In case of a land trust, attach a sheet with the name, address and telephone numbers of all trustees and beneficiaries of the trust.

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CITY CLERK

**III. Agent Authorization:**

Please check one of the following:

☐ I will represent my petition before the Plan Commission and the City Council of the City of Joliet.

☒ I hereby authorize the person named below to act as my agent in representing this application before the Plan Commission and the City Council of the City of Joliet.

Note: The agent is the official contact person for this project and the single point of contact. All correspondence and communication will be conducted with the agent. If no agent is listed, the owner will be considered the agent.

(Please Print)

Nathaniel P. Washburn

KGG LLC

Agent's Name

Company Name (If Applicable)

111 N. Ottawa Street, Joliet, Illinois 60432

Agent's Mailing Address City/State/Zip

(815 ) 727-4511

( )

Agent's Phone

Area Code Mobile

(815 ) 727-1586

Area code

Fax

Email address: nwashburn@kggllc.com

If an agent is representing the owner of the property, please complete the following information:

I hereby authorize the person named above to act as my agent in processing this application before the City Council of the City of Joliet:

Owner's Signature (s):

Joan Schaefer

Sole Beneficiary and Power of Direction Holder

Date: 6/16/24

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

**IV. REGISTERED VOTERS RESIDING ON TERRITORY TO BE ANNEXED:**

Joan Schaefer

NAME

2749 Golf Road, Joliet, IL 60432

ADDRESS

( )

Area Code

Phone

Larry Williams

NAME

2749 Golf Road, Joliet, IL 60432

ADDRESS

( )

Area Code

Phone

NAME

ADDRESS

( )

Area Code

Phone

CHRISTA M. DESIDERIO  
JOLIET, ILLINOIS  
CITY CLERK

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**v. Property information:**

**PROPERTY ADDRESS:**

2749 Golf Road Joliet Illinois New Lenox 60432  
PROPERTY ADDRESS CITY STATE TOWNSHIP ZIP CODE

PROPERTY IDENTIFICATION NUMBER (P.I.N. or tax number(s): \_\_\_\_\_  
15-08-06-400-009-0000

**LEGAL DESCRIPTION OF PROPERTY (OR ATTACH COPY OF "PLAT OF SURVEY"):**

Lot 8 in Arthur T. McIntosh and Company's Pilcher Park Farms, a subdivision of the  
South 1/2 of Section 6, Township 35 North, Range 11, East of the Third Principal  
Meridian, according to the Plat thereof recorded February 9, 1942 as Document  
552354, in Will County, Illinois

LOT SIZE: \_\_\_\_\_ WIDTH \_\_\_\_\_ DEPTH \_\_\_\_\_ AREA Approx: 5 Acres

PRESENT LAND USE: Residential

EXISTING ZONING: Will County A-2

PROPOSED LAND USE AND/OR PURPOSE OF ANNEXATION: Residential - to connect to  
Joliet water

ZONING CLASSIFICATION REQUESTED: R-1 or such other zoning as staff deems appropriate

**USES OF SURROUNDING PROPERTIES:**

NORTH Residential EAST Residential  
SOUTH Residential WEST Residential

**IMPORTANT**

You must appear before the Plan Commission and the City Council to present your annexation request. A lawyer may appear on your behalf.

The undersigned understands that they are not entitled to any City of Joliet funding for public improvements by virtue of this annexation.

I hereby depose and say that all of the above statements are true and correct to the best of my information and behalf.

*[Signature]*  
PETITIONER

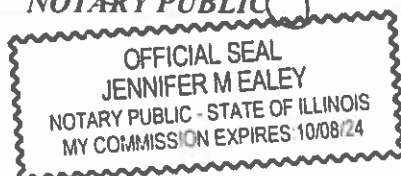
*6/16/22*  
DATE

PETITIONER

DATE

Subscribed and Sworn to before me  
this 16th day of June, 2022.

*Jennifer M Ealey*  
NOTARY PUBLIC



CHISTA M. DESIDERIO  
CITY CLERK  
JOLIET, ILLINOIS

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## 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:

2749 Golf Road, Joliet, IL 60432

PIN(s): 15-08-06-400-009-0000

### 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

BMO Harris Bank Trust Number 1078

Joan Schaefer (100% Interest Holder) - 2749 Golf Rd, Joliet, IL 60432; 928-377-0710

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

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E-MAIL: \_\_\_\_\_ 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:** \_\_\_\_\_

**DATE:** 06/17/2022

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

Joan Schaefer, Beneficiary, 928-377-0710

**PRINT**