



Village of Bartlett

Concept Plan Application Packet

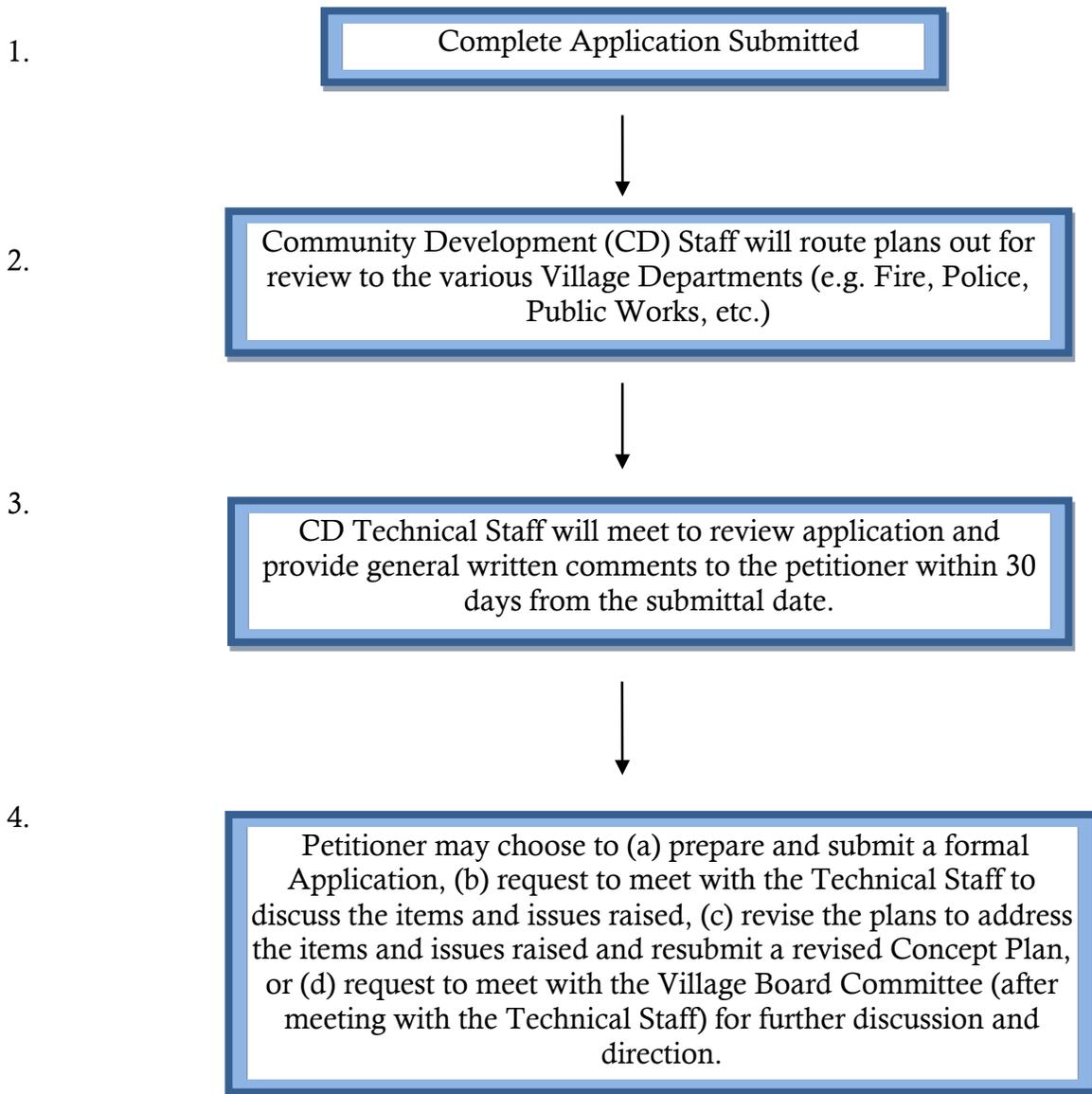
COMMUNITY DEVELOPMENT DEPARTMENT

E-mail: communitydevelopment@vbartlett.org

Village website: www.village.bartlett.il.us

Phone: (630) 540-5940

APPLICATION PROCESS FOR CONCEPT PLANS



CONCEPT PLAN REVIEW

Prior to submitting a request for approval of a Preliminary Subdivision PUD or Site Plan an applicant may request a Concept Plan Review from the Village Technical Staff. An application for the Concept Plan Review shall be made on the attached application form along with the required materials listed below. For additional information, please refer to the Bartlett Subdivision Ordinance which may be viewed online at www.village.bartlett.il.us.

PRE-APPLICATION CONSULTATION

Applicants are encouraged to consult with Community Development Staff prior to submitting an application. The Community Development Staff is available by appointment from 8:30 am- 4:30 pm, Monday-Friday.

REQUIRED APPLICATION MATERIALS

All concept requests require the following items to be submitted for a complete application:

- _____ A completed/signed **Application** (8 copies)
- _____ **Property Owner's Signature** on the application or a **Letter** signed by the Property Owner authorizing the petition submittal
- _____ **\$400 Application Fee** + consultant fees (if applicable)
- _____ **Concept Plan** (8 **folded** full size copies, one reduction (11x17) and a pdf (CD, flash drive or email) including but not limited to the following:
 - General site improvements including:
 - Lot and Block arrangement
 - Street Patterns and Location
 - Areas Designated for Landscaping, detention, parks/open space
 - Setbacks
 - Acreage
 - Potential utility connections
- _____ **Additional Information** as requested by CD Staff



VILLAGE OF BARTLETT CONCEPT PLAN APPLICATION

(Please type or complete in blue or black ink.)

For Office Use Only

Case # _____

(Village Stamp)

PROJECT NAME _____

PETITIONER INFORMATION (PRIMARY CONTACT)

Name: _____

Street Address: _____

City, State: _____

Zip Code: _____

Email Address: _____

Phone Number: _____

Preferred Method to be contacted: (Please Circle): **Phone/Email**

PROPERTY OWNER INFORMATION

Name: _____

Street Address: _____

City, State: _____

Zip Code: _____

Phone Number: _____

OWNER'S SIGNATURE: _____ Date: _____

(OWNER'S SIGNATURE IS REQUIRED or A LETTER AUTHORIZING THE PETITION SUBMITTAL.)

PROPERTY INFORMATION

Common Address/General Location of Property: _____

Property Index Number ("Tax PIN"/"Parcel ID"): _____

Acreage: _____

No. of Lots/Units: _____

Zoning: Existing: _____
(Refer to Official Zoning Map)

Land Use: Existing: _____

Proposed: _____

Proposed: _____

Comprehensive Plan Designation for this Property: _____

(Refer to Future Land Use Map)

APPLICANT'S EXPERTS (If applicable, including name, address, phone and email)

Attorney

Engineer

Other

ACKNOWLEDGEMENT

I understand that by signing this form, that the property in question may be visited by village staff and Board/Commission members throughout the petition process and that the petitioner listed above will be the primary contact for all correspondence issued by the village.

I certify that the information and exhibits submitted are true and correct to the best of my knowledge and that I am to file this application and act on behalf of the above signatures.

Any late, incomplete or non-conforming application submittal will not be processed until ALL materials and fees have been submitted.

SIGNATURE OF PETITIONER: _____

PRINT NAME: _____

DATE: _____

REIMBURSEMENT OF CONSULTANT FEES AGREEMENT

The undersigned hereby acknowledges his/her obligation to reimburse the Village of Bartlett for all necessary and reasonable expenses incurred by the Village for review and processing of the application. Further, the undersigned acknowledges that he/she understands that these expenses will be billed on an ongoing basis as they are incurred and will be due within thirty days. All reviews of the petition will be discontinued if the expenses have not been paid within that period. Such expenses may include, but are not limited to: attorney's fees, engineer fees, public advertising expenses, and recording fees. Please complete the information below and sign.

NAME OF PERSON TO BE BILLED: _____

ADDRESS: _____

PHONE NUMBER: _____

EMAIL: _____

SIGNATURE: _____

DATE: _____