

the  
**Village of New Lenox**  
*"Home Of Proud Americans"*

**PLANNING DEPARTMENT  
SKETCH PLAN APPLICATION**

**PETITION/DEVELOPMENT NAME:**

**PETITIONER INFORMATION:**

<b>PRIMARY CONTACT</b>	MAILING ADDRESS	CITY, STATE, ZIF
PHONE #	FAX #	E-MAIL ADDRESS

**SITE INFORMATION:**

<b>SITE ADDRESS OR LOCATION</b>	ACRES	PROPERTY ID # (PIN)
EXISTING LAND USE		CURRENT ZONING

BRIEF DESCRIPTION OF THE DEVELOPMENT. \*

\* Attach additional sheets if necessary

**OTHER APPLICANT & INTERESTED PARTIES:**

	NAME	COMPANY	MAILING ADDRESS	PHONE # & FAX #
<b>PETITIONER</b>				
<b>OWNER</b>				
<b>DEVELOPER(S)</b>				
<b>LAND PLANNER</b>				
<b>ENGINEER</b>				
<b>AGENT/ATTORNEY</b>				

**SURROUNDING ZONING AND LAND USE**

ZONING	JURISDICTION (VILLAGE OR COUNTY)	LAND USE
NORTH		
SOUTH		
EAST		
WEST		

**CHECKLIST OF REQUIRED SKETCH PLAN APPLICATION ITEMS:**

- One (1) original and 20 copies of the Sketch Plan Application.
- 20 Copies of the Concept Plan.