

KNOX COUNTY UNIFIED DEVELOPMENT FEE SCHEDULE  
ZONING PROCEDURES

**ALL APPLICATIONS TO BE CHARGED \$ .70 per Word FOR LEGAL NOTICE.**

**Per: 55 ILCS 5/5-12009**

|  |  |
|--|--|
| Map Amendments / Zoning District Changes:    | \$300, plus \$10 per acre  |
| Setback Variations: *                        | <b>(MUST HAVE UNUSUAL HARDSHIP OR DIFFICULTY 10.4.03)</b>  |
| First Variation:                             | \$250, plus \$2 per % of distance variance<br>A=required Feet, B=request Feet,<br>C=difference, D= %, E=% of variance<br>“A-B=C”, “C/A=D”, “DX100=E”,<br>“E x \$2 = amount added to \$250” |
| Each Additional Variation:                   | \$100, plus \$1 per % of distance variance<br>A=required Feet, B=request Feet,<br>C=difference, D= %, E=% of variance<br>“A-B=C”, “C/A=D”, “DX100=E”,<br>“E x \$1 = amount added to \$100” |
| Administrative Variations:                   | \$100, plus \$1 per % of distance variance<br>A=required Feet, B=request Feet,<br>C=difference, D= %, E=% of variance<br>“A-B=C”, “C/A=D”, “DX100=E”,<br>“E x \$1 = amount added to \$100” |
| Reinstating Expired Variations:              | 50% of initial fee   |
| Conditional Use Permits:                     | 0-10 acres \$500 for entire parcel,<br>10.01 acres or more, \$15 per acre entire parcel + \$500  |
| Reinstating Expired Conditional Use Permits: | 50% of initial fee   |
| Large Scale Development Plans:               | \$200, plus \$20 per lot, unit or acre or part<br>Thereof, whichever is greater  |
| Appeals:                                     | \$500  |
| Text Amendments:                             |  |
| First Amendment:                             | \$300  |
| Each Additional Amendment:                   | \$150  |

\*[and other zoning procedures found in Section 10.4.02 of the Zoning Resolution]

Rev 08/16/2024

PLEASE READ THIS APPLICATION AND THE ACCOMPANYING CHECKLIST THOROUGHLY BEFORE BEGINNING, THEN TYPE OR HANDPRINT USING BLUE OR BLACK INK.

## KNOX COUNTY ZONING BOARD OF APPEALS ZONING APPLICATION

Applicant: \_\_\_\_\_ Case # \_\_\_\_\_

ZBA Date: \_\_\_\_\_ Parcel #(s): \_\_\_\_\_

The undersigned hereby makes application to the Knox County Zoning Board of Appeals and the Knox County Board, as follows:

### SECTION ONE: Purpose of Application

**1(a)** this application is a request for one of the following actions. Please (**Circle**) the requested action and complete the entries. If a section does not apply to you please signify by marking "N/A" in the space provided.

1. A "Zoning District Change"/" Zoning Map Amendment" from the " \_\_\_\_\_ " Zoning District, to the " \_\_\_\_\_ " Zoning District
2. A "Conditional Use" Permit for \_\_\_\_\_  
\_\_\_\_\_, in the " \_\_\_\_\_ " Zoning District.
3. A "Setback Variation", from the required measurement/ distance of \_\_\_\_\_ feet to requested measurement / distance of \_\_\_\_\_ feet, in the " \_\_\_\_\_ " Zoning District. **Attach a Site Plan** (see sample)
4. An "Appeal" to Article \_\_\_\_\_, Section \_\_\_\_\_ of the Knox County Zoning Resolution, to allow: \_\_\_\_\_  
\_\_\_\_\_ in the " \_\_\_\_\_ " Zoning District.
5. A "Text Amendment" to Article " \_\_\_\_\_ " Section " \_\_\_\_\_ " of the Knox County Zoning Resolution, to read as follows: \_\_\_\_\_  
\_\_\_\_\_ in the " \_\_\_\_\_ " Zoning District
6. Commercial **Solar**? kW? \_\_\_\_\_
7. Commercial **Wind**? kW? \_\_\_\_\_ Wind Towers? How many? \_\_\_\_\_
8. Meteorological tower? How many? \_\_\_\_\_ Permanent? \_\_\_\_\_ or Temporary? \_\_\_\_\_

**1(b)** the subject property is currently vacant, or actively used for the following activities: \_\_\_\_\_  
\_\_\_\_\_.

- A. For how long? \_\_\_\_\_ which are land uses now permitted by Article " \_\_\_\_\_ " Section " \_\_\_\_\_ " of the Knox County Zoning Resolution?

**1(c)** the subject property is proposed to be used for the following activities: \_\_\_\_\_

\_\_\_\_\_ which are land uses permitted by Article " \_\_\_\_\_ " Section " \_\_\_\_\_ " of the Knox County Zoning Resolution.

**1(d)** Is this application filed in an attempt to remedy a zoning violation, has work begun or continued before obtaining this application or other required permits, are there nonconformities present, or does this application involve some after-the fact situation? **IF NO**-Skip to the next question / **IF YES** continue

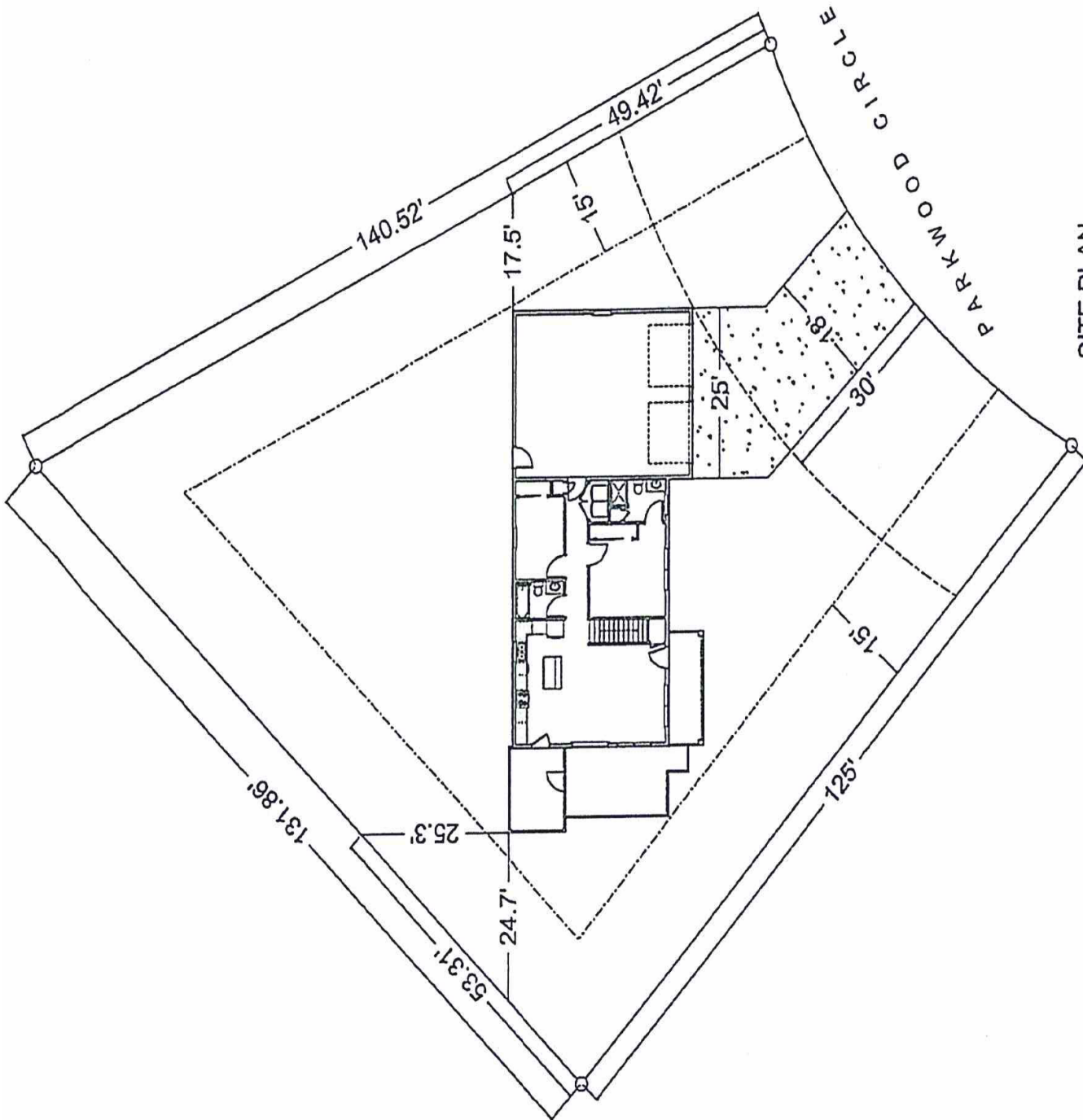
Explain the nature of the specific situation: \_\_\_\_\_

Has the Zoning violation involved some notification from the Knox County Zoning Department, a court order, or other activities? **IF NO**-Skip to the next question **IF YES**-continue

Give the date(s) of such notification and explain the nature of these activities: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

# SAMPLE SITE PLAN

Here is an example of a site plan that is required with this application. Please show the setbacks you are **requesting** along with the **current** setback requirements from all the appropriate property lines as outlined in the Knox County Zoning Resolution.



SITE PLAN  
LOT #20 OAK RUN  
SCALE = 1:20

**SECTION TWO:**

**Subject Property and Surrounding Property Information-will be filled out by Zoning**

2(a) Street Address or particular location or subject property: \_\_\_\_\_  
\_\_\_\_\_

2(b) Legal description: \_\_\_\_\_  
\_\_\_\_\_

2(c) 10-Digit Parcel ID Number (can be found in the top left-hand corner of your tax bill): \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

2(d) Subject property size: \_\_\_\_\_ square feet, or \_\_\_\_\_ acres, lot frontage, \_\_\_\_\_ lot depth \_\_\_\_\_

2(e) what are the current land uses and zoning classifications on the subject property and adjoining parcels of land surrounding the subject property?

|                  | <u>Current Use of Land</u> | <u>Current Zoning Classification</u> |
|------------------|----------------------------|--------------------------------------|
| Subject Property | _____                      | “ _____ ”                            |
| North of Site    | _____                      | “ _____ ”                            |
| South of Site    | _____                      | “ _____ ”                            |
| East of Site     | _____                      | “ _____ ”                            |
| West of Site     | _____                      | “ _____ ”                            |

2(f) Describe, in detail, the existing structures and physical attributes of the subject property: \_\_\_\_\_  
\_\_\_\_\_

**2(g) Subject property is located within 1.5 miles of any municipality. IF YES- Circle all that apply, IF NO- skip to the next question**

**Abingdon Altona East Galesburg Galesburg Henderson Knoxville Maquon Oneida Rio  
St. Augustine Victoria Wataga Williamsfield Yates City**

**OR Another municipality located in or outside Knox County: \_\_\_\_\_**

2(h) provide the names, complete mailing addresses, and Parcel ID Number's for the owners of record of all adjoining properties, including property located across streets, roads, alleys or public rights-of-way:

Property ID Number & Name of Property Owner & Address of Property Owner:

**SECTION THREE: Applicant Information-to be filled out by property owner**

3(a) Applicant(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

(1) Is the applicant acting for himself or herself? Yes \_\_\_\_\_ No \_\_\_\_\_.

(2) Is the applicant acting as an agent or representative of a principal? Yes \_\_\_\_\_ No \_\_\_\_\_.

**3(b)** Subject Property Owner(s) / Principal(s): \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

**3(c)** Agent or Representative of Principal: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

1. Is the applicant the trustee for a subject property held in trust? **If Yes**-Continue, **If No**-skip to next question

Name of Trust: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

**NOTE: for all trusts: provide, as a separate attachment prepared by the applicant, a statement from the trustee verifying the correct name and address of all beneficial owners.**

2. Is the applicant a corporation? **If Yes**-Continue, **If No**- skip to next question

Name of Corporation: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

**NOTE for all corporations: Provide, as a separate attachment prepared by the applicant, a statement verifying the correct name and address of all officers and directors of the corporation and all of the stockholders or shareholders owning any interest in excess of 20 percent of all outstanding stock or shares of the corporation.**

3. Is the applicant, or his or her principal, a business or entity doing business under an assumed name?

**If Yes**-Continue, **If No**-Skip to the next question

Name of Business or Entity: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

**NOTE for all businesses or entities doing business under an assumed name: Provide, as a separate attachment prepared by the applicant, a statement verifying the correct name and residence of all actual owners of the business or entity.**

4. Is the applicant, or his or her principal, a partnership, joint venture, syndicate, or an unincorporated voluntary association? **If yes**- Continue, **If No**- Skip to next question

Name of Partnership, Joint Venture, Syndicate, or Unincorporated Voluntary Association:

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Mailing Address: \_\_\_\_\_

Daytime Phone # \_\_\_\_\_ Cell Phone # \_\_\_\_\_ FAX # \_\_\_\_\_

***NOTE for all partnerships, joint ventures, syndicates, and unincorporated voluntary associations: Provide, as a separate attachment prepared by the applicant, a statement verifying the correct name address of all Partners or members of the Partnership, joint venture, syndicate, or unincorporated voluntary association.***

**SECTION FOUR: Identifying and Understanding the Issues**

**4(a)** If this application is a request for a **Zoning District Change / Zoning Map Amendment**, applicants must respond to each of the following statements while presenting their request to the Zoning Board of Appeals, and with an additional written explanation as a separate attachment hereto:

1. Discuss and explain how the zoning district change/map amendment can be expected to provide adequate light, pure air, and safety from fire and other dangers for citizens of the County generally, and of surrounding property specifically.
2. Discuss and explain how the zoning district change/map amendment can be expected to conserve the value of land and buildings for citizens of the County generally, and of surrounding property specifically.
3. Discuss and explain how the zoning district change/map amendment can be expected to lessen or avoid the congestion of traffic on the public roads for citizens of the County generally, and of surrounding property specifically.
4. Discuss and explain how the zoning district change/map amendment can be expected to promote the public health, safety, comfort, convenience, morals, and general welfare for citizens of the County generally, and of surrounding property specifically.
5. Discuss and explain how the zoning district change/map amendment can be expected to protect the character and stability of the land use areas and zoning districts within the County generally, and of surrounding property specifically.
6. Discuss and explain how the zoning district change/map amendment can be expected to promote the orderly and beneficial development of the land use areas and zoning districts within the County generally, and of surrounding property specifically.
7. Discuss and explain how the zoning district change/map amendment can be expected to lessen or avoid the hazards to persons and damage to property resulting from the accumulation or runoff of storm or floodwaters within the County generally, and of surrounding property specifically.
8. Discuss and explain how the zoning district change/map amendment can be expected to be consistent with the goals and objectives of the Knox County Comprehensive Plan.
9. Discuss and explain how the zoning district change/map amendment can be expected to further and promote the public interest, not the interests of the applicant.

**4(b)** If this application is a request for a **Conditional Use Permit**, applicants must respond to each of the following statements while presenting your request to the Zoning Board of Appeals, and with an additional written explanation as a separate attachment hereto:

1. Discuss and explain how the establishment, maintenance, and operation of the special land use can be expected to affect the public health, safety, morals, comfort, and general welfare for citizens of the County generally, and of surrounding property specifically.
2. Discuss and explain how the special land use can be expected to affect the use and enjoyment of other property in the immediate vicinity for purposes already permitted and the property values in the neighborhood.
3. Discuss and explain how the establishment of the special land use can be expected to affect the normal and orderly development, and the improvement, of the surrounding property for land uses permitted in those zoning districts.
4. Discuss and explain how utilities, access roads, drainage, and other necessary facilities, have been, are being or will be provided.
5. Discuss and explain how measures have been, or will be taken to provide ingress and egress so designed to minimize traffic congestion in the public streets.
6. Discuss and explain how the special land use will, in all other respects, conform to the applicable regulations of the zoning district in which it is located.

**4(c)** If this application is a request for a **Setback Variation**, applicants must respond to each of the following statements while presenting your request to the Zoning Board of Appeals, and with an additional written explanation as a separate attachment hereto:

1. Discuss and explain how based on the particular physical surroundings, shape or topographical conditions of the specific property involved, how a particular hardship to the owner would result, as distinguished from a mere inconvenience if the strict letter of the regulations were to be carried out.
2. Discuss and explain how the conditions upon which the application for a variation is based are unique to the specific property for which the variation is sought, and are not applicable, generally, to other properties within the same zoning classification.
3. Discuss and explain how the variation will affect the value or income potential of the property.
4. Discuss and explain how the granting of the variation will affect the public welfare or other property or improvements in the neighborhood in which the property is located.
5. Discuss and explain how the proposed variation will affect the adequate supply of light and air to adjacent property, the congestion of the public streets, the danger of fire, the public safety, and the property values within the neighborhood.
6. Discuss and explain how the proposed variation complies with the spirit and intent of the restrictions imposed by the Zoning Resolution.
7. If this application is a request for a Setback Variation, applicants must answer each of these additional questions:
  - a. Do conditions exist which prevent the development or use of the subject property?  

**If Yes** - explain further in a separate written statement, **If No-** Continue
  - b. Are the conditions that prevent the development or use of the subject property the result of actions by past or present property owners?  

**If Yes-** explain further in a separate written statement, **If No-** Continue

**SECTION FIVE: Supporting Information, Signature, and Declaratory Statement**

**5(a) Required Supporting Information to be Prepared and Provided by Applicant:** Prepare and include a Site Plan drawn to scale illustrating subject property boundaries; boundary and setback dimensions; size, dimensions, and locations of each, every, and all existing buildings and structures; size, dimensions and locations of proposed buildings, structures and alterations; easements and encroachments of any kind, and; any natural or man-made features of the subject property.

Also prepare and include a detailed written statement relating to the above-listed requirements, fully explaining your proposal, the relevant issues, and any measures intended to mitigate the effects of your proposal on neighboring properties, within the context of the standards found in Section Four, above.

**Incomplete applications will not be processed and will be returned to the applicant after sixty (60) days. Information submitted after a receipt deadline will delay the consideration and progress of this application.**

**5(b) Required Attendance at Public Hearing:** The Knox County Zoning Board of Appeals (ZBA) has established a policy requiring the applicant or a representative of the applicant to be present at any public hearing at which the ZBA will consider the application. EIGHT copies of any handouts and/or exhibits submitted at the time of the application for ZBA members and staff. Failure to provide the EIGHT copies will incur fees of \$1.00 per page to the applicant or designee. Failure of the applicant or designee to appear before the ZBA will postpone consideration of the application by the ZBA. Failure of the applicant or designee to appear before the ZBA may result in dropping the application from further consideration and surrendering the entire application fee.

**5(c) Declaratory Statement:** I \_\_\_\_\_, by signing below, do hereby declare and state that I am the owner, or authorized agent of the owner or principal, of the above described property. I further declare that all information contained in this application and accompanying documentation, and all testimony to be given before the Knox County Zoning Board of Appeals, is truthful and accurate to the best of my knowledge. I fully understand that this application form, when properly completed, along with any attachments and inclusions becomes and constitutes a petition of record duly requesting the proposed change(s), and that any false statements or inaccuracies, whether intentionally misleading or not, will delay the consideration and progress of this application. **I acknowledge the attendance responsibilities of the applicant as set forth in paragraph "5b" above.**

**I also understand that payment of a fee is required to be submitted at the time of application.**

In addition, I understand that the acceptance of this completed zoning application by Zoning Department staff does not guarantee their affirmative recommendation, or the passage or approval of this request by the Zoning Board of Appeals, Zoning Committee, or Knox County Board.

Applicant Signature(s): \_\_\_\_\_

Date Signed: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

NOTE: The original completed application must be submitted to the Knox County Zoning Department, Administrative Annex, at 121 South Prairie Street, Suite 1, Galesburg, Illinois 61401. Faxed applications must be immediately followed by their hard copy originals. A copy of your original application, along with staff-entered information will be provided to you at your request. No faxed or copied signatures will be accepted. **Make application fee payment checks payable to the "Knox County Zoning Department"**





**THIS SPACE IS RESERVED FOR STAFF USE ONLY**

Application Date: \_\_\_\_\_  
Fee Paid: \_\_\_\_\_  
Receipt No: \_\_\_\_\_  
ZBA Hearing Date: \_\_\_\_\_  
Committee Meeting Date: \_\_\_\_\_  
County Board Date: \_\_\_\_\_

File No: \_\_\_\_\_  
Acreage: \_\_\_\_\_  
Township Name: \_\_\_\_\_  
School District: \_\_\_\_\_  
Fire District: \_\_\_\_\_

**YOU ARE REQUIRED TO CONTACT KARA DOWNIN AT THE KNOX COUNTY SOIL & WATER CONSERVATION DISTRICT OFFICE @ 309-342-5138, EXT. 3 TO SCHEDULE AN APPOINTMENT WITH HER TO COMPLETE A NATURAL RESOURCE INFORMATION REPORT APPLICATION. (FEES WILL APPLY.)**

All information MUST be completed for Kara Downin @ KCSW by: \_\_\_\_\_ and submitted to the Zoning Department by: \_\_\_\_\_ deadline so you will be eligible to attend the \_\_\_\_\_ Zoning Board of Appeals Hearing.

The Knox County Zoning department will NOT proceed with this Conditional Use Permit without receiving notification from the Knox County Soil & Water Conservation District that you have completed your application, paid the fee for a Natural Resource Information Report, and Kara Downin, the Knox County Resource Conservationist is proceeding with a scheduled visit to complete the report.

Thank You!

Knox County Zoning Department

Missi Wheeler 309-345-3840

Email: [melissa.wheeler@knoxcountyil.gov](mailto:melissa.wheeler@knoxcountyil.gov)



