

City of Rockford, Illinois

Community & Economic Development Department
Planning & Zoning Division
425 East State Street, Rockford, IL 61104
Phone: (779) 348-7158 Fax: (815) 967-4243
Web Site: www.rockfordil.gov

**ZONING BOARD OF APPEALS****2025 SCHEDULE of PUBLIC HEARINGS**

FILING DEADLINE: (Thursday, 5:00 P.M.)	MEETING DATE: (Third Tuesday of the Month)
December 12, 2024	January 22, 2025 - Wed
January 16, 2025	February 19, 2025 - Wed
February 13, 2025	March 18, 2025
March 13, 2025	April 15, 2025
April 17, 2025	May 20, 2025
May 15, 2025	June 17, 2025
June 12, 2025	July 15, 2025
July 17, 2025	August 19, 2025
August 14, 2025	September 16, 2025
September 18, 2025	October 21, 2025
October 16, 2025	November 18, 2025
November 13, 2025	December 16, 2025
December 11, 2025	January 21, 2026 - Wed

These public hearings, conducted by the Zoning Board of Appeals, will be held at: City Council Chambers, Second Floor, City Hall, 425 East State Street, Rockford, Illinois. The hearings commence at 5:30 P.M. and are open to the public. If you have any questions, please call the Zoning Office at (779) 348-7158.

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**ZONING APPLICATION FORM**(Office use) **ZBA FILE#:** _____

(Please Type or Print)

1. Address of subject property: _____**2. Legal description: Lot; _____ Block; _____ Subdivision; _____**

(If property has not been subdivided attach a legal description)

Property dimensions are: _____ ft. by _____ ft. = _____ square feet. _____

3. Property Identification number(s): _____**4. Owner of record is:** _____ **Phone:** _____

(Address) (City) (State) (Zip)

5. Applicant's Name: _____ **Phone:** _____

(Address) (City) (State) (Zip)

E-Mail (Required) _____**6. Applicant's interest in the property:** _____
(Owner, Agent, Contractor, Realtor, etc.)**7. Applicant's Address (Required):** _____**8. THE FOLLOWING ACTION IS REQUESTED:****A. Zoning Map Amendment from:** _____ **to:** _____**B. Special Use Permit for:** _____

In a (n) _____ Zoning District

C. Variation to: _____

In a (n) _____ Zoning District

Illinois State Law requires that in order for a Variation to be granted a hardship must be proven by a positive Finding of Fact for seven criteria (See attached sheet). Please indicate what your specific hardship(s) is (are) on a separate piece of paper:

9. All existing uses on the property are:

10. The proposed uses on the property, if this application is approved are:

11. List the owners of record of all properties located adjacent to, and across the street or alley from, the property for which this application is being filed. (If property is held in a Trust, give the Trust Number and Bank name and address.) These parties will be notified by the city of pending action prior to the public hearing

(If more space is needed, attach a separate sheet of paper)

THE APPLICANT'S SIGNATURE BELOW INDICATED THE INFORMATION CONTAINED IN THIS APPLICATION AND ON ANY ACCOMPANYING DOCUMENTS IS TRUE AND CORRECT.

(Name of Applicant)

(Name of Owner, if different)

(Signature of Applicant)

Date:

(Signature of Owner, if different)

Date:

Zoning Map Number: _____ Date of Public Hearing: _____ Filing Fee: _____

Is Illinois Department of Conservation review required?

Is Illinois Department of Transportation Access Permit required?

Is Winnebago County Highway Department Access Permit Required?

Application accepted by: _____ **Date** _____

Office Use Only

Zoning Map Number: _____ Date of Public Hearing: _____ Filing Fee: _____

Is Illinois Department of Conservation review required?

Is Illinois Department of Transportation Access Permit required?

Is Winnebago County Highway Department Access Permit Required?

Application accepted by: _____ **Date** _____

FINDINGS OF FACT FOR A VARIATION SECTION

1604 VARIATION**1604.5 FINDINGS OF FACT FOR RECOMMENDATION BY ZONING BOARD OF APPEALS****1604.5 A FINDINGS**

For the Zoning Board of Appeals to approve an application for any proposed Variation. It must find that each of the following items are met:

1. Because of the particular physical surroundings, shape, or topographical condition of the specific property involved, 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. The conditions upon which a petition for a Variation is based are unique to the property for which the Variation is sought and are not applicable, generally, to other property within the same zoning classification
3. The purpose of the variation is not based exclusively upon a desire to increase the value or income potential of the property
4. The alleged difficulty or hardship is caused by this Ordinance and has not been created by any persons presently having an interest in property or by a predecessor in title.
5. The granting of the Variation will not be detrimental to the public welfare, or injurious to other property or improvements in the neighborhood in which the property is located.
6. The proposed Variation will not impair an adequate supply of light and air to adjacent property, or substantial increase the congestion of the public street, or increase the danger of fire, or endanger the public safety, or substantially diminish or impair the property values within the neighborhood.
7. The proposed Variation complies with the spirit and intent of restriction imposed by this Ordinance.

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**2025
ZONING APPLICATION FEE SCHEDULE
*All fees are non-refundable***

ZONING MAP AMENDMENT

		Fee	Tech Fee	TOTAL
RE, R-1, R-1U, R-2				
Less than ½ acre		\$572.00	\$57.20	\$629.20
½ - 2 acres		\$662.00	\$66.20	\$728.20
2 – 5 acres		\$803.00	\$80.30	\$883.30
Plus \$25 for every acre or portion thereof over 5 acres		No maximum		
R-3, R-4				
Less than ½ acre		\$814.00	\$81.40	\$895.40
½ - 2 acres		\$922.00	\$92.20	\$1014.20
2 – 5 acres		\$959.00	\$95.90	\$1054.90
Plus \$25 for every acre or portion thereof over 5 acres		No maximum		
C-1, C-2, C-3, C-4				
Less than ½ acre		\$825.00	\$82.50	\$907.50
½ - 2 acres		\$962.00	\$96.20	\$1058.20
2 – 5 acres		\$1048.00	\$104.80	\$1152.80
Plus \$40 for every acre or portion thereof over 5 acres		No maximum		
I-1, I-2, I-3				
Less than ½ acre		\$975.00	\$97.50	\$1072.50
½ - 2 acres		\$1049.00	\$104.90	\$1153.90
2 – 5 acres		\$1141.00	\$114.10	\$1255.10
Plus \$50 for every acre or portion thereof over 5 acres		No maximum		

SPECIAL USE PERMIT

RE, R-1, R-1U, R-2				
Less than ½ acre		\$572.00	\$57.20	\$629.20
½ - 2 acres		\$662.00	\$66.20	\$728.20
2 – 5 acres		\$803.00	\$80.30	\$883.30
Plus \$25 for every acre or portion thereof over 5 acres		No maximum		
R-3, R-4				
Less than ½ acre		\$814.00	\$81.40	\$895.40
½ - 2 acres		\$922.00	\$92.20	\$1014.20
2 – 5 acres		\$959.00	\$95.90	\$1054.90
Plus \$25 for every acre or portion thereof over 5 acres		No maximum		
C-1, C-2, C-3, C-4, PUD				
Less than ½ acre		\$825.00	\$82.50	\$907.50
½ - 2 acres		\$962.00	\$96.20	\$1058.20
2 – 5 acres		\$1048.00	\$104.80	\$1152.80
Plus \$40 for every acre or portion thereof over 5 acres		No maximum		
I-1, I-2, I-3				
Less than ½ acre		\$975.00	\$97.50	\$1072.50
½ - 2 acres		\$1049.00	\$104.90	\$1153.90
2 – 5 acres		\$1141.00	\$114.10	\$1255.10
Plus \$50 for every acre or portion thereof over 5 acres		No maximum		
MURAL		\$200.00	\$20.00	\$220.00

<u>MODIFICATION OF SPECIAL USE PERMIT</u>	\$538.00	\$53.80	\$591.80
<u>RENEWAL OF SPECIAL USE PERMIT</u>	\$538.00	\$53.80	\$591.80
<u>APPEAL OF ZONING OFFICER DETERMINATION</u>	\$579.00	\$57.90	\$636.90

PLANNING AND ZONING FEES (Continued)

	<u>Fee</u>	<u>Tech Fee</u>	<u>TOTAL</u>
<u>VARIATION</u>			
RE, R-1, R-1U, R-2	\$441.00	\$44.10	\$485.10
R-3, R-4	\$557.00	\$55.70	\$612.70
C-1, C-2, C-3, C-4	\$662.00	\$66.20	\$728.20
I-1, I-2, I-3	\$737.00	\$73.70	\$810.70
<u>ZONING TEXT AMENDMENT</u>	\$531.00	\$53.10	\$584.10

FASTRAC TEXT AMENDMENT: Accepted one week from standard filing deadline.

FasTrac zoning applications shall include a one hundred percent (100%) surcharge on the application fee. All filing fees include publication costs, unless the publication costs exceed one-third (1/3) of the filing fee, in which case, that amount of the publication cost that is in excess of two-thirds (2/3) of the filing fee shall be billed to the applicant by the Zoning Office on or before the date of the Zoning Board of Appeals meeting for which the notice was published and shall be due and payable within ten (10) days. The City Council may refuse to take action on an application for which additional publication costs have not been paid.

COMBINED ZONING APPLICATION: The fee for a combined application shall be the single highest fee, of any one of the individual zoning requests within the combined application.

FILING FEE EXEMPTIONS OR REFUNDS FOR ZONING APPLICATIONS: Exemptions or refunds from required filing fees shall be authorized only in accordance within the combined application.

- A. Whenever the applicant is a department, division, or office of the City of Rockford, then no application filing fee shall be required
- B. Whenever an application has been accepted in error, then the situation shall be explained to the Zoning Board of Appeals and the Board may direct the filing fee be refunded to the applicant.
- C. In those situations not covered by the provisions of the Subsections A and B, above, City Council, by adoption of a Resolution, may direct the Zoning Officer to accept an application without requiring payment of the filing fee, or direct the filing fee to be refunded.
- D. No zoning application fee shall be charged to any property owner who is required to file a zoning application to add a parking area on the property when the need for parking area is caused by the City removing parking from an adjacent arterial or collector street.

2. In some cases review may be required by the **Illinois Department of Natural Resources**. The applicant must contact the Illinois Department of Natural Resources prior to filing an application to find out if this review will be necessary for their property.
3. If the Zoning Application requested involves a change of use, new access or a modification of an existing access onto a State or County maintained road or street, then the petitioner must apply for an access permit from the appropriate agency. The applicant may write or call the following for information on how to apply or whether or not a permit is necessary:

Illinois Department of Transportation
Division of Highways, District 2
819 Depot Avenue
Dixon, IL 61021-3500
(815) 284-2271

Winnebago County Highway Dept.
424 North Springfield Avenue
Rockford, IL 61101
(815) 965-9431

4. Names and addresses of the required adjacent property owners (required under item 10 on the Zoning Application form) can be obtained from:

Winnebago County Recorder's Office
404 Elm Street, 4th Floor
Rockford, Illinois

5. A soils report is required by State law for all zoning requests.

The Winnebago County Soil and Water Conservation District
4833 Owen Center Road
Rockford, Illinois 61101
(815) 965-2392 ext. 3

You must request this report from them; their form is attached at the end of this packet. Please note that a fee is charged for this service.

6. A ***site plan drawn to-scale*** must be submitted with the application if the zoning request includes either a Special Use Permit and/or a Variation. The site plan must be drawn to scale (engineer or architects scale, and at least one copy of any site plan submitted to this department must be sized 11" x 17" or 8 .5" x 11 ", and include the following: (see sample site plan attached for example).

- Dimensions of the parcel and dimensions and setbacks of all existing and proposed structures.
- Streets, sidewalks and curb cuts for access to the property; the required number of off-street parking stalls, Loading and stacking areas, and their dimensions; and traffic circulation aisles and their dimensions.
- A landscaping plan showing all the landscape strips and buffers required by the Zoning Ordinance, including dimensions and a summary of the landscape units required to be provided with the proposed development.

Please Note: If alterations to the site plan submitted are required in order to meet the Zoning Ordinance regulations you will be required to revise the site plan. This could result in a delay in the processing of your application.

7. A zoning narrative describing the reason for the application must be submitted as a part of this application. The narrative should be a brief summation of the purpose behind the application and why the request is necessary for the property and/or business operations.

You or your representative ***must*** appear before the Zoning Board of Appeals on the designated meeting date. Failure to appear may result in a Zoning Board recommendation to deny your request or cause action on your request to be delayed. If, for any reason, you desire to have your application heard at a later Zoning Board of Appeals meeting, a request must be submitted in writing to this office prior to the meeting date for which it has been scheduled.

If you have any questions regarding the zoning procedure or the information required on the application form please contact the Zoning Office at 779-348-7158 - we are here to assist you.



WINNEBAGO COUNTY SOIL AND WATER CONSERVATION DISTRICT

4833 Owen Center Rd.
Rockford, IL 61101-6007
P: (815) 965-2392, Ext. 3
Open Mon-Fri 8am-4:30pm
Website: www.winnebagoswcd.org

For Office Use Only:

Date Received: _____

Report #: _____

Paid On: _____

Required information for Natural Resource Inventory Reports and Zoning Letters.

Incomplete applications will not be processed. Please allow 30 days to process your application.

Required Forms Application Checklist:

<input type="checkbox"/> Plat of Survey w/Legal Description	<input type="checkbox"/> Zoning or Land Use Petition (if not listed below)
<input type="checkbox"/> Site Plan/Concept Plan	<input type="checkbox"/> Fee and Completed Application
<input type="checkbox"/> Location Map (if not on above map)	<input type="checkbox"/> Optional EcoCAT Report Fee (see fee schedule)

Zoning application filed with: *(The report will be sent to the office indicated below by the SWCD Office)*

County Rockford Loves Park Machesney Park Cherry Valley

Location of subject property: _____
(Street Address)

1) _____
PIN #: 2) _____
3) _____

Project Area: _____ Acres

Project/Subdivision Name: _____ **Current Zoning:** _____

Contact Information for Applicant/Petitioner:

(The SWCD Office will send a copy of the report to this listed applicant)

Name: _____

Address: _____

Phone #: (_____) _____ - _____

Email: _____

Alternative/Owner Contact: (if different than applicant)

Check if a copy is to be sent to this person

Name: _____

Address: _____

Phone #: (_____) _____ - _____

Email: _____

Please indicate how you would like to receive your copy: **Mail/Hard Copy** **Email/PDF**

Type of Request: *(Check the all that apply and describe the request in detail)*

Change in Zoning from _____ to _____
 Variance: _____
 Special Use Permit: _____
 Other: _____

Existing Land Use: (vacant, agriculture, residential, etc.) _____

Proposed Land Use: _____

Date of Public Hearing: (if known) _____

Proposed Improvements: (Check all that apply)

Planned Structures:

- Dwelling w/ Basement
- Dwelling w/o Basement
- Commercial Building
- Other _____

Open Space:

- Parks/Playground Area
- Common Open Space
- Other _____

Water Supply

- Individual/Private Well
- City/Community Water

Wastewater Treatment:

- Private Septic System
- City/Community Sanitary System

Storm Water Treatment:

- Drainage Ditch/Swales
- Storm Sewers
- Dry Retention Basin
- Wet Retention Basin
- None
- Other _____

Other Improvements Not Listed Above: (Please describe in detail below)

Existing Site Characteristics: (Check all that apply)

<input type="checkbox"/> Ponds/Lakes	<input type="checkbox"/> Floodplain/way	<input type="checkbox"/> Woodland	<input type="checkbox"/> Drainage Tile	<input type="checkbox"/> Building(s)
<input type="checkbox"/> Streams/Rivers	<input type="checkbox"/> Wetland(s)	<input type="checkbox"/> Cropland	<input type="checkbox"/> Disturbed Land	<input type="checkbox"/> Other _____

FILING DEADLINE

Any person who petitions any municipality or county agency in the District for variation or amendment from that municipality's or county's zoning ordinance or who proposed to subdivide vacant or agricultural lands therein shall furnish a copy of such petition or proposal to the District **no less than 10 days prior** to the regularly scheduled meeting of the District.

I (we) understand the filing of this application allows an authorized representative of the Winnebago County Soil and Water Conservation District to visit and conduct any necessary on-site investigations on the site which is described above. It is also understood that through this request I am giving the Soil and Water Conservation District permission to provide NRCS Wetland Inventory Information on my land in regards to the Natural Resource Information Report. I understand that this report becomes public knowledge once accepted by the District Board of Directors. Completions of this report may require 30 days as allowed under State Law.

(Petitioner)

(Date)

This report is used as a guide in making land use decisions and does not preclude further refinement of soil type boundary lines during more detailed on-site investigations. Interpretations are based on criteria established by the National Soils Handbook (USDA-Natural Resource Conservation Service) and are subject to change by this office and appropriate county agencies.

FEES:

Zoning Letters:

- Resource Concern Letter - \$100
- No Impact Letter - \$50

Natural Resource Inventory (NRI) Report:

- Ag Zoned Land - \$ 400 (0-5 acre)
 - \$20/additional acre 5-100 acres
 - \$15/additional acre 100-200 acres
 - \$10/ additional acre >200 acres
- Vacant Land - \$250 (0-5 acre)
 - \$10/additional acre over 5 acres

Optional: EcoCAT Information Only Report - \$35

ACCEPTED FORMS OF PAYMENT:

- Cash
- Check made payable to:
Winnebago County SWCD
A fee of \$25.00 will be charged for each returned check
- Credit card (Illinois E-Pay through the SWCD website at www.winnebagoswcd.org). Limited to \$1000



Winnebago SWCD fee determination are final. Reports will not be completed without payment.