

46th Ward Zoning and Development Application

ALL APPLICABLE SECTIONS OF THIS FORM SHOULD BE COMPLETED AND SUBMITTED BEFORE A MEETING IS SCHEDULED WITH THE ALDERMAN'S OFFICE. IF INFO IS NOT IMMEDIATELY AVAILABLE BUT IS RELEVANT TO THE PROJECT WRITE, "FUTURE". ANY INFO NOT RELEVANT CAN BE MARKED, "N/A" OR BLANK.

Completed forms can be mailed or emailed to the 46th Ward office: 4544 N. Broadway Ave., Chicago IL, 60640 Email: james@james46.org (Subject: Development Application)

46th Ward Zoning and Development process summary for developers:

1. Fill out Application (below)
2. Meet with Alderman Capplemann
3. Present proposal at open public meeting
4. If necessary, attend meetings with neighborhood groups to address specific concerns
5. For large developments, meet with 46th Ward Zoning & Development committee to present proposal
6. Meet with the Zoning and Development committee for final review (if changes are requested)
7. Decision announced by Alderman Capplemann the next business day
8. This process will conclude prior to any City of Chicago approvals from Alderman Capplemann
9. If a proposal is rejected, the developer may re-present the project with significant changes at the discretion of the Alderman

For more information about the 46th Ward Zoning and Development process, please refer to the [Developer and Committee Procedure Guidelines](#)

CHICAGO'S 46TH WARD ALDERMAN
JAMES CAPPLEMAN
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Questions? Please call the 46th Ward Service office at 773-878-4646 or email tressa@james46.org

[SECTION A] – PLEASE COMPLETE ALL RELEVANT CONTACT INFORMATION

General Information

Project Name: LAURENCE LOFTS

Date Submitted: _____

Property Owner's Name: LAURENCE LOFTS, LLC

Property Owner's Address: 1039 W. LAURENCE

Property Owner's Phone Number: 312-466-8100

Property Owner's Email: JIM@BUILDING-GROUP.COM

Developer's Name: JIM STOLLER

Developer's Address: SAME

Developer's Phone Number: SAME

Developer's Email: SAME

Developer's Website: N/A

Architect's Name: ARCHITECTURAL CONSULTING GROUP, LTD.

Contact: THOMAS ZORDAN

Architect's Address: 303 N. Northwest Hwy. Ste 205, Barrington, FL

Architect's Phone Number: 847-277-1908

Architect's Email: tzordan@ACG-LTD.NET

General Contractor's Name (if known): TBD

Contact: _____

Have you met with the Department of Housing and Economic Development regarding the project? Yes No

Who is the DHED contact?: NIENA IDEMUDIA

Contact's Phone Number: 312-744-4891

Project Information

Type of Construction: Rehab New Construction Both None/Existing

Project Location/Address: 1039-45 W. LAWRENCE

Brief description of project: CONVERSION OF SRO UNITS TO 80 DWELLING UNITS

IF THE PROJECT IS AN EXISTING STRUCTURE WITH NO NEW CONSTRUCTION OR REHAB PLEASE FORGO THE REMAINDER OF SECTION A AND CONTINUE TO SECTION B

Name of current owner of property: _____

If the applicant is not the owner, please describe agreement with owner: _____

If owned by land trust, name of beneficiary: _____

Does the project include an Orange, Red, Landmark or National Register Historic Structure?

If so, which? ORANGE - RATED

Current Zoning Designation:

Do you plan to maintain the current zoning designation? Yes No

If, so please complete **SECTION B.**

Building Use(s): Single Family Apartment Condominium Townhouse Commercial Mixed Use

Office Institutional Other _____

Lot dimensions: 100' x 150'

Site Square Footage: 15,000 sq. ft.

Building Footprint: SAME - SEE SITE PLAN

Building Height (from grade at curb to highest point of building): 94'-10" (EXISTING)

Type of construction material to be used on all sides of the exterior: MASONRY - EXISTING TO REMAIN

Is the cost of this project above \$10 Million? Yes No

If yes, what is the total estimated cost of this project? TBD

[SECTION B] – COMPLETE SECTION IF PROJECT IS REQUESTING FINANCIAL SUPPORT FROM THE CITY OF CHICAGO AND/OR AN ALDERMANIC APPROVAL REQUEST SUCH AS REQUESTS FOR:

1. ZONING CHANGE
2. ZONING VARIANCE
3. CURB CUTS

Do you plan to maintain the current zoning designation? Yes ___ No

If No, what would the proposed change be? Please list intended zoning designation and a brief description:

B3-3 CHANGED TO B3-5
PROPOSED ADAPTIVE REUSE AND CONVERSION OF AN EXISTING
(NOW VACANT) SRO BUILDING TO 80 RESIDENTIAL UNITS

Will there be a request for curb cuts? Yes ___ No

If Yes, Number: ___ Size: _____ Location: _____

Are you seeking any financial assistance from the City of Chicago? Yes ___ No

If yes, please select all that apply:

TIF Assistance Requested amount: N/A

Land write down or negotiated sale amount: N/A

Tax Class L: Yes ___ No ___

County Tax Abatement Program (e.g., Class 6- Industrial or 7- Commercial): Yes ___ No ___

FOR ANY REQUESTS PLEASE INCLUDE ALL RELEVANT DOCUMENTATION

[SECTION C] – COMPLETE SECTION IF PROJECT INCLUDES NEW CONSTRUCTION

Please list addresses of all current and recent development projects (feel free to attach): — N/A —

Has the developer's property(ies) been subject to legal action? Yes ___ No ___

If so, please explain the circumstances of the legal action: _____

Has a traffic study been completed: Yes ___ No ___

If yes, please attach document.

How many on-site parking spaces will be provided?

How will they be accessed?

Will the project include bike parking and storage? Yes No ___ → T.O.D. PROJECT

If yes, how will they be accessed? BIKE PARKING AND STORAGE WITHIN BUILDING

Where will the garbage dumpsters/cans for the property be located? REAR - SEE PLAN SET

Will the proposed project include any sustainable or "green" features such as a green roof, permeable pavement, car sharing, etc.? If so, please describe: _____

Will this project create any jobs? Yes No ___

If yes, please describe: CONSTRUCTION, MANAGEMENT AND MAINTENANCE

FOR ANY REQUESTS PLEASE INCLUDE ALL RELEVANT DOCUMENTATION

[SECTION D] – SECTION MUST BE COMPLETED IF THE PROJECT FITS ANY OF THE FOLLOWING CRITERIA. BUILDINGS FITTING THESE CRITERIA MUST HAVE ALSO COMPLETED ALL PREVIOUS SECTIONS.

1. PROJECT IS A ~~PLANNED DEVELOPMENT~~ TYPE 1 TOD ZONING CHANGE
2. PROJECT COST IS ~~GREATER THAN \$10 MILLION~~ N/A
3. PROJECT INCLUDES AFFORDABLE HOUSING UNITS - 10% provided on-site
4. TIF FUNDING IS REQUESTED - NO

Has financing been secured for this project? Yes No

If yes, please briefly describe the nature of the financing, and attach any appropriate additional description and documentation: PRIVATE FINANCING - NO CITY FUNDS / NO TIF

If TIF assistance is requested, state which TIF district and briefly describe the amount and nature of the request:

N/A

Is the proposed project a planned development? Yes No

If the project is a planned development, briefly describe and attach appropriate documentation: N/A

Is this project subject to the Affordable Requirements Ordinance (ARO)? Yes No

If yes, how does the developer plan to satisfy the requirements? provide 8 ARO units WITHIN THE SUBJECT BUILDING.

If there is a plan for affordable units beyond the ARO requirement, please describe the affordable housing component and attach any appropriate additional description and documentation. 10% ONSITE PROVIDED.