

Application for Public Hearing SPECIAL USE PERMITS

YOU MUST PROVIDE THE FOLLOWING INFORMATION: IF ADDITIONAL SPACE IS NEEDED, ATTACH EXTRA PAGES TO THE PETITION.

Name of Business (If applicable): Deam Book Wells
Address/Location of Property in Question: 816 5 Cak Port
Property Identification Number(s)(PIN):
Name of Property Owner(s): LBS MANAGEMENT, LLL
Address of Property Owner(s): 721 ONTARIS St, OAK PARK, 26 60302
E-Mail of Property Owner(s): LBS C LBS - M AWAGE WE WT. COM. Phone: 312-318-2627
If Land Trust, name(s) of all beneficial owners: (A Certificate of Trust must be filed.)
Name of Applicant(s): Applicant's Address: Applicant's Phone Number: Office 773.4/0.870 E-Mail Other: 312.404.0001 Project Contact: (if Different than Applicant)
Contact's Address:
Contact's Phone Number: OfficeE-Mail
Other:
Property Interest of Applicant:OwnerLegal RepresentativeContract PurchaserOther (If Other - Describe):OwnerLegal RepresentativeContract PurchaserOther
Existing Zoning:Describe Proposal:

Residential Non-Residential Mixed Use OTHER:	
To the South:	
To the South:	
How the property in question is currently improved? Residential Non-Residential Mixed Use OTHER: Describe Improvement: Stribe property in question currently in violation of the Zoning Ordinance? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit? He property in question presently subject to a Special Use Permit?	
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IF Fes: D Frank Lloyd Wright D Ridgeland/Oak Fark D Gunderson	
From what Section(s) of the Zoning Ordinance are you requesting approval / relief?	
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Article:Section:	
Article: Section:	
Article:Section:	
explain why, in your opinion, the grant of this request will be in harmony with the neighborhood and not contrary to the intent and purpose of the Zoning Ordinance or Comprehensive Plan;	lS_

I (we) certify that all the above statements and the statements contained in any papers or plans submitted herewith are true to the best of my (our) knowledge and belief.

I (we) consent to the entry in or upon the premises described in this application by any authorized official of the Village of Oak Park for the purpose of securing information, posting, maintaining and removing such notices as may be required by law.

(Signature) Applicant

(Printed Name) Owner

Owner's Signature must be notarized

SUBSCRIBED AND SWORN TO BEFORE ME THIS

DAY OF Angust, 2001

"OFFICIAL SEAL" APRIL D SLUGG

Notary Public - State of Illinois

My Commission Expires August 07 2023

Project Summary

I am a licensed massage therapist in which I passed the Illinois state board on December 19, 2018 I graduated from Cortiva Institute with a 4.0 GPS. At Dream Body LLC, I will provide prenatal massage, relaxation massages, sport massage, cupping massage, therapeutic rejuvenation and clinical massages. My clientele are athletes (NFL player's,) other LMT's, healthcare providers, essential workers, local law enforce and more I have a variety or clientele.

My mission is to promote relaxation, stress relief, and a pain free lifestyle though therapeutic massage and bodywork while supporting you in healing yourself holistically. Our focus is to provide natural solutions as well as education that ultimately result in helping you realize optimum health and happiness. The business will offer rejuvenation sport and clinical therapy. The business will be a new independent business. It will operate as a sole proprietor Dream Body LLC. I will help bring awareness Health and wellness as I am experienced, knowledgeable and licensed in clinical massage therapy in which I have a background with hands on experience in working within chiropractic and physical therapy offices. Therefore, my main focus is to help and assist with client's goals and needs to get and remain healthy and well, to assist with mobility and rehabilitation.

Standards

1. The establishment, maintenance, and operation of the proposed special use will not have a substantial or unduly adverse impact on the neighborhood or endanger the public health, safety, or welfare.

As a licensed massage therapist, I will operate under state and federal rules and regulations within professional standards. Dream Body Works LLC will not negatively impact or alter the neighborhood or endanger the public health, safety or welfare. I have established myself as a community-based, friendly, and welcoming therapist, providing prenatal massage, relaxation massage, sport massage, and cupping massage. I provide therapeutic rejuvenation and clinical massages.

I have been a licensed massage therapist since December 19, 2018, in which I passed the Illinois state board exam. After graduating I increased my knowledge and experience with working alongside some of Chicago top Chiropractors. I provide highly knowledgeable insight for my customers to foster their health and wellness. I am a licensed massage therapist and well trained to provide clinical massage and therapeutic massage services to my customers. Therefore, the proposed special use will not have any adverse impact on the neighborhood or endanger public health, safety, or welfare.

2. The proposed special use is compatible with the general land use of adjacent properties and other property within the immediate vicinity.

My Business is currently adjacent to a Cafe, Sushi bar, Clothing boutique, Hair Salon/Spa, Nail Shop, Grocery Store and Bank. No adverse impacts by reason of noise, smoke, odor, dust, or vibration are anticipated in the operation of my business.

3. The special use in the specific location proposed is consistent with the spirit and intent of this Ordinance, adopted land use policies and the Comprehensive Plan.

Dream Body LLC will bring awareness to Health wellness. Through my knowledge and experience I will educate and continue to enhance the quality of life of Oak Park's residents.

4. The special use meets the requirements for such classification in this Ordinance

helping and assist with the needs to get and remain healthy and well

The requested special use is to allow for the operation of a massage service establishment in the NC Neighborhood Commercial Zoning District. Thus, I am seeking a special use under section 8-3 ("Table 8-1 Use Matrix" of the Zoning Ordinance).