



Office of the City Clerk



O2012-8095

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City Council Document Tracking Sheet

Meeting Date:	11/15/2012
Sponsor(s):	Cappleman, James (46)
Type:	Ordinance
Title:	Loading/Standing/Tow Zone(s) at 4720 N Clarendon Ave
Committee(s) Assignment:	Committee on Pedestrian and Traffic Safety

MEMORANDUM FOR TRAFFIC REGULATIONS

**STANDING ZONE - NO PARKING - TOW ZONE - EXCEPT WITH
FLASHING LIGHTS:**

Street, etc: North Clarendon Street

Location, etc: No. 4720

Distance or extent: _____

Time Limit: 15-MINUTES -Unattended vehicles must have flashing lights

Days: all days

Hours: at all times



JAMES CAPPLEMAN
Alderman, 46th Ward



4544 N Broadway
Chicago, IL 60640
Tel: 773-878-4646
Fax: 773-878-4920
info@james46.org

**Alderman James Cappleman
46th Ward – City of Chicago
Standing/Loading Zone Application**

CHECKLIST

In order for your request to be reviewed, your application must be complete and include (please check off):

- Letter on company letterhead requesting a standing zone or loading zone, specifically detailing the reasons for the zone. If there is not enough room on this application to answer all questions fully, please provide this information in your letter.
- Two photographs of the proposed location: one from across the street directed at your location and the second from the sidewalk at a property adjacent to your business.
- A diagram detailing the building, sidewalk, street, proposed location of the zone and all other parking restrictions on adjacent properties, including measurements. (Example provided)
- Completed Business Information Section.
- Completed Loading, Standing or Valet Zone Section.
- Signed Certification Section.

BUSINESS INFORMATION

Business Name: Aurora Chicago Lakeshore Hospital - Children's Pavilion

Business Address/Signs Location:

4720 N. Clewiston

Zip: 60640

Billing Address (if different):

4840 N. Marine Dr.

Zip: 60640

Federal Identification Number:

7

Occupancy Limit: NA

Present parking regulations at your location (meters, etc):

Open street parking

Business Hours:

Open all days 24/7/365

Monday:	Tuesday:	Wednesday:
Thursday:	Friday:	Saturday:
Sunday:		

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Length of Time at Location: new location - opening planned January 2013
Number of Full-Time Equivalent Employees: 200

Scope of Business Activity:
Psychiatric Hospital

Business Licenses Held:
City of Chicago Hospital License # 2021834 State of IL # 000526

Contact Name: C. Alan Eaks
Title: CEO

Contact Phone Number: (773) 907-4666
Email: eaks@chicagolakeshorehospital.com

Please fill out one of the following sections according to the type of zone you are requesting.

Check if Applicable **AMENDMENT TO EXISTING ZONE**

If you wish to amend an existing zone, please complete this section and fill out one of the following sections according to type of zone amendment you are requesting. Complete this section only if you currently have a standing/loading zone and you would like to make changes to it.

Type of Existing Parking Restriction:

- Loading Zone 15-Minute Standing Zone
- Valet Loading Zone Other: _____

Restriction Times for Existing Zone:

Monday:	Tuesday:	Wednesday:
Thursday:	Friday:	Saturday:
Sunday:		

Length of Zone: _____ feet and approximately _____ vehicle spaces
Last Invoice Number: _____ Permit Number: _____
Permit Date: _____

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Please continue to one of the following sections according to the type of amendment you are requesting

Check if Applying

15 MINUTE STANDING ZONE

Please understand that:

- Vehicles parking in standing zones are limited to 15 minutes and must have their hazards flashing while the driver is away from the vehicle.
- Vehicles extending their stay over the 15 minute time limit are in violation of the Chicago Municipal Code and are liable to receive a citation.
- Even though the standing zone is placed adjacent to your business, vehicles standing in the zone for the allotted time are not obligated to patronize your business.
- It is illegal to post additional signage in the public way, including signage, which would cause one to assert that the loading zone is reserved solely for your business.

Restriction Times Requested: *All days 24/7/365*

Monday:	Tuesday:	Wednesday:
Thursday:	Friday:	Saturday:
Sunday:		

Length of Zone: *67'7"* feet or approximately _____ vehicle space(s)

Reason for Zone / Business activity requiring standing zone:

Front Entrance of Hospital. Utilized for drop-off and pick-up of patient arriving via own transportation

Please describe the availability/restrictions of on-street parking:

Open, non-metered street parking

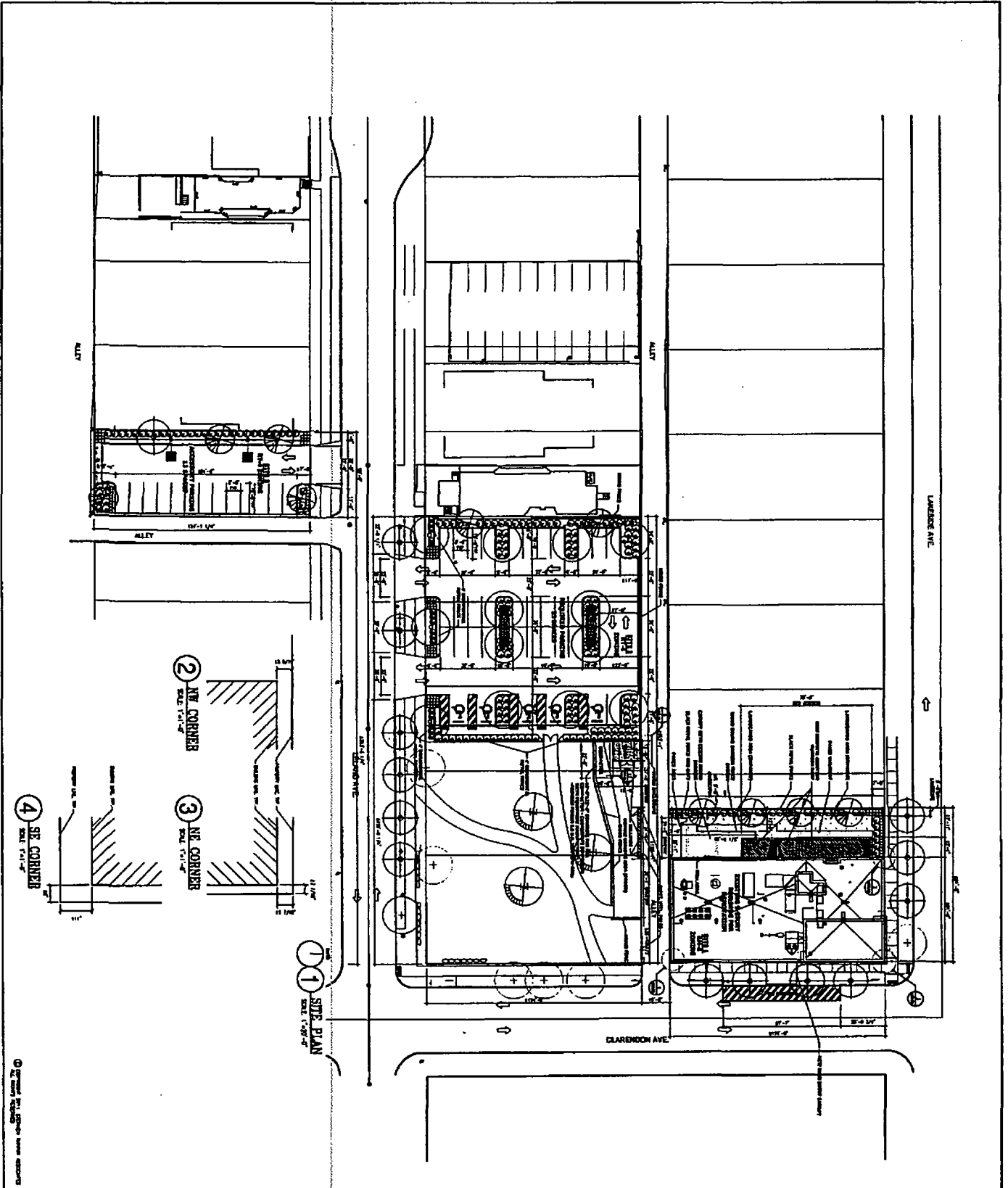
On the average day, how many sales/visits would utilize the zone? *25* out of a total of *100*

Front view of 4720 N. Clarendon



Side view of 4720 N. Clarendon





<p>STEPHEN RANKIN ASSOCIATES ARCHITECTS</p> <p>800 WEST WACKER DRIVE SUITE 700 CHICAGO, ILLINOIS 60606</p> <p>TEL: 312.898.0002 FAX: 312.898.0005 www.sraa.com sr@a.sraa.com</p>	
<p>DATE: 11/14/12 DRAWN BY: [Name] CHECKED BY: [Name] SCALE: AS SHOWN PROJECT NO: A00.00</p>	
<p>CHICAGO LAKESIDE RESIDENTIAL REDEVELOPMENT/ADAPTATION CHICAGO, ILLINOIS</p>	