



City of Chicago



Or2021-37

Office of the City Clerk

Document Tracking Sheet

Meeting Date: 2/26/2021

Sponsor(s): Waguespack (32)

Type: Order

Title: Issuance of permits for sign(s)/signboard(s) at 1942 W Fullerton Ave - south elevation

Committee(s) Assignment: Committee on Zoning, Landmarks and Building Standards

CITY COUNCIL
COMMITTEE ON ZONING, LANDMARKS AND BUILDING STANDARDS

COUNCIL ORDER

RE: Approval of sign over 100 square feet in area or over 24 feet above grade

ORDERED, that the City Council hereby approves the following sign application submitted by:

Applicant*: NORTHSHORE UNIVERSITY HEALTHSYSTEM

(* The Applicant is the owner of the real property or the business tenant of the real property. Do not list the sign contractor, sign erector, sign company or advertising entity in the above space.)

This Order approves the following sign in accordance with Municipal Code of Chicago Section 13-20-680:

Address of Sign: 1942 W. FULLERTON Chicago, IL 60614

Zoning District: C3-3

DOB Sign Permit Application #: 100903276

Sign Details:

1. On-premise OR Off-premise

2. Static sign OR Dynamic-image display sign

3. Number of sign faces 1

4. Projecting over the public way NO (Yes or No) If yes, Public Way Use #: NA

5. Dimensions: Length 18 feet 2 inches Height 10 feet 3 inches

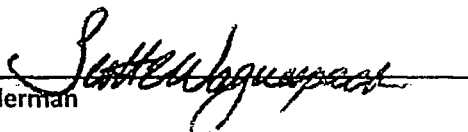
Total square feet in area: 186 feet 0 inches

6. Height above grade: 1 feet 0 inches

7. Elevation (side of building or lot where the sign will be erected): SOUTH

8. Name of Sign Contractor/Erector: BULLEY & ANDREWS LLC

To be legal, such sign shall comply with all provisions of Title 17 of the Chicago Municipal Code ("Zoning Ordinance") and all other provisions of the Municipal Code governing the permitting, construction and maintenance and removal of signs and sign structures. Failure of the applicant and the applicant's successors to comply shall be grounds for invalidation or revocation of the sign permit.


Alderman

32
Ward



CITY OF CHICAGO

DEPARTMENT OF BUILDINGS

Sign Permit Application

APPROVAL NUMBER	APPLICATION NUMBER 100903276	ANNUAL FEE	WORK CODE	DRAWINGS ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO													
DATE OF APPLICATION 12/16/2020		TYPE OF SIGN SIGNBOARD															
ADDRESS OF SIGN 1942 W FULLERTON AVE, 60614-		LENGTH	FT 18	IN 2	HEIGHT	FT 10	IN 3										
BUILDING	ORIGINAL PERMIT NUMBER	AREA	SQ FT 186	WEIGHT	LBS 5	SIGN HEIGHT ABOVE GRADE/ROOF FT 1											
TYPE OF PERMIT NEW CONSTRUCTION (SIGN)		SHAPE OF SIGN REGULAR															
PAYER OF ANNUAL INSPECTION BOURBON, DAN 5270 LINCOLN AVE SKOKIE, IL 60077 (847)980-6739		SIGN WILL READ NORTHSHORE UNIVERSITY HEALTHSYSTEM IMMEDIATE CARE															
SIGN MANUFACTURER UNKNOWN		NO OF LAMPS			TOTAL WATTAGE												
ADDRESS WHERE SIGN CAN BE SEEN PRIOR TO ERECTION		TYPE OF LAMP															
TICKET NUMBER 0		NO OF BALLAST/TRANSFORMERS			INPUT OF TRANSFORMERS												
REINSPECTION CONTROL NUMBER		CONTRACTOR WILL INSTALL			<input checked="" type="checkbox"/> FEEDERS <input type="checkbox"/> CUSTOMER LEADS												
TYPE OF SUPPORT FOR SIGN BUILDING		TYPE OF SWITCH															
SIGN BOARD SUPPORT MEMBERS STEEL		LOCATION OF SWITCH															
ANNUAL FEE		SIGN LOCATION NON-ILLUMINATED WINDOW APPLIQUE ON W. FULLERTON / SOUTH ELEVATION. 18'-2" L X 10'-2.5" H. SIGN STATES: "NORTHSHORE IMMEDIATE CARE" WITH GRAPHIC															
CONSTRUCTION FEE 200.00		<table border="1"> <tr> <td>1017 B FEE</td> <td>_____</td> <td rowspan="2">Check # for Zoning</td> </tr> <tr> <td>TOTAL FEE</td> <td>200.00</td> </tr> <tr> <td>AMOUNT PAID</td> <td>200.00</td> <td rowspan="2">Check # for DCAP</td> </tr> <tr> <td>BALANCE DUE</td> <td>_____</td> </tr> </table>						1017 B FEE	_____	Check # for Zoning	TOTAL FEE	200.00	AMOUNT PAID	200.00	Check # for DCAP	BALANCE DUE	_____
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BALANCE DUE	_____																
1017 B FEE																	
TOTAL FEE																	
AMOUNT PAID																	

The undersigned certify that the statements in this application are true and correct and that all work done under the proposed permit will conform to the requirements of the Chicago Municipal Code

LICENSE #
ELECT CONTR*
ADDRESS
SUPERVISOR SIGNATURE

TGC04239
CONTRACTOR* BULLEY & ANDREWS, L.L.C. GENCON
ADDRESS 1755 W. ARMITAGE AVE. CHICAGO IL, 60622-
SIGNATURE

*IF APPLICABLE

The permit issued on this application will authorize only signs here applied for. If other signs are to be erected they must be covered by additional permits.

City of Chicago
Lori E Lightfoot, Mayor



Department of Buildings
Matthew Beaudet, Commissioner

TYPE OF BUSINESS <u>PUBLIC</u> Other <u>HOSPITAL</u> Name: <u>NORTHSHORE UNIVERSITY HEALTHSY</u> I.I.C # _____ Renewal Date _____	SIGN BOND REQUIRED? <input type="checkbox"/> YES COUNCIL ORDER REQUIRED <input checked="" type="checkbox"/> YES IS SPECIAL PERMISSION REQUIRED FROM CHIEF ELECTRICAL <input type="checkbox"/> YES IF YES, ATTACH LETTER OF REQUEST
Projects Over: <input checked="" type="checkbox"/> Private Property <input checked="" type="checkbox"/> Public Way Grant Permit #: _____ <input type="checkbox"/> Planned Development/Manufacturing PMD/PD# _____ Zoning District <u>C3</u> Other <u>C3-3</u>	TIME STAMP
TYPE OF SIGN: <input type="checkbox"/> ADVERTISING <input type="checkbox"/> ILLUMINATE <input type="checkbox"/> MOVEABLE <input checked="" type="checkbox"/> BUSINESS <input type="checkbox"/> FLASHING	
TOTAL STREET FRONTAGE OF LOT (IN FEET) <u>235</u> TOTAL AREA OF NEW SIGN (SQ.FT.) <u>186</u> TOTAL AREA OF ALL SIGNS ON LOT (SQ.FT.) <u>1</u> HEIGHT OF SIGN ABOVE GRADE (TO TOP) <u>11ft 3in</u>	
DISTANCE OF CURB LINE OUTER EDGE (ft) <u>25</u> DISTANCE OF STRUCTURE INNER EDGE (ft) <u>24</u>	SIGN CLERK _____ APPROVED FOR PERMIT _____
DISTANCE FROM (ft): A. PUBLIC PARK (OVER 10 ACRES) <u>5,000</u> B. EXPRESSWAY (IF LESS THAN 1,000 FT.) <u>5,000</u> C. RESIDENCE DISTRICT (ADVERTISING SIGNS ONLY) <u>5,000</u>	REMARKS
IF REPLACEMENT SIGN OR CHANGE OF FACE, WHAT DOES THE EXISTING SIGN READ? Original Payee: _____ Landmark Hold: <input type="checkbox"/> Status: _____	
ZONING (OFFICE USE ONLY)	