



City of Chicago



Or2017-448

Office of the City Clerk

Document Tracking Sheet

Meeting Date:	9/6/2017
Sponsor(s):	Osterman (48)
Type:	Order
Title:	Issuance of permits for sign(s)/signboard(s) at 4920 N Kenmore Ave
Committee(s) Assignment:	Committee on Zoning, Landmarks and Building Standards

City Council
Meeting Date: 9/6/17
Committee on Buildings (signs)

ORDERED, That the Commissioner of Buildings is hereby directed to

Issue a sign permit to: (Contractor's name and address)

Chesterfield Awning Co.

16999 Van Dam Road, South Holland, IL 60473

For the erection of a sign / signboard over 24 feet in height and / or over 100 square feet (in area of one face) at: Business NAME and ADDRESS)

The Everest Group / Uptown TLC

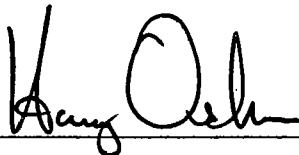
4920 N. Kenmore Ave. Chicago IL 60640

Dimensions: Length 42 ft Height 4 ft 2 in

Height above grade / roof to top of sign: 12 ft

TOTAL SQUARE FOOT AREA 175 ft

Such sign(s) shall comply with all applicable provisions to TITLE 17 of the Chicago Zoning Ordinance
And all other applicable provisions of the Municipal Code of the City of Chicago governing the
construction and maintenance of outdoor signs, signboards and structures.



Alderman, 48 Ward

Oversized Signs, Canopies, Awnings: Info Needed for Ordinance

Sign Company: Chesterfield Awning Co.

Street Address: 16999 Van Dam Road

City, State, Zip: South Holland, IL 60473

Business Name: The Everest Group, Uptown TLC

Street Address: 4920 N. Kenmore Ave.

City, State, Zip: Chicago, IL, 60640

Dimensions: Total Length: 42 ft Height: 4ft 2in

Height above grade / roof to top of sign: 12ft

TOTAL SQUARE FOOT AREA: 175

CITY OF CHICAGO SIGN PERMIT APPLICATION CONTINUED

For Office Use

ZONING	PUBLIC WAY

Sign Review Fee:

Zoning Review Fee: \$ _____ Total Fee: \$ _____

Amount Paid: \$ _____ Balance Due: \$ _____

PERMIT IS VALID FOR A PERIOD OF FIVE YEARS AFTER ISSUANCE. IT IS SOLELY THE RESPONSIBILITY OF THE OWNER OR LESSEE TO FILE FOR RENEWAL

* Once zoning fee is paid, this application is valid for a period of up to six months from payment date.

Applies to sign permits applied for on or after April 2, 2014.

City of Chicago
Mayor Rahm Emanuel



Department of Buildings
Felicia Davis, Commissioner

CITY OF CHICAGO SIGN PERMIT APPLICATION CONTINUED

Section 4 continued

Distance from outer edge of sign or structure to curb line: 21'-0" (FL)

Distance from inner edge of sign or sign structure to curb line: 22'-6" (FL)

Distance from:

Public Park 10 acres or more: _____ (FL)

Public Park 2 acres or more: _____ (FL)

Expressway or Toll Road: _____ (FL)

Lake Shore Drive: _____ (FL)

Michigan Avenue (Oak St. to Roosevelt Rd.): _____ (FL)

Residential District: _____ (FL)

Residential building in a D district: _____ (FL)

Existing off-premise/advertising signs on same side of street? Yes No

In a B or C District: _____ (FL)

In a D or M District: _____ (FL)

Waterways: _____ (FL)

Section 5 - Sign Permit History

Does the proposed sign, change, alter or replace an existing sign? Yes No

If yes, were permits issued for the sign being replaced, changed or altered? Yes No

If yes, please list each permit number and date each permit was issued:

Permit Number: _____ Date issued: _____

Permit Number: _____ Date issued: _____

Permit Number: _____ Date issued: _____

Permit Number: _____ Date issued: _____

Does the proposed sign change a static sign to a dynamic image display sign? Yes No

Does the proposed sign change or alter the square footage or the height of the sign or sign structure? Yes No

Does the proposed sign change an on-premise sign to an off-premise/advertising sign? Yes No

Section 6 - Attestation and Signatures

We, the undersigned, under penalty of perjury, do hereby affirm and attest that the above information is true, complete, and correct and acknowledge that incorrect information is cause to revoke or rescind a permit.

Owner of Real Property: Secretary of the Navy Date 7/28/2017

Lessee of Real Property: _____ Date 7/28/2017

Expediter: _____ Date _____

Supervising Electrician: _____ Date _____

Sign Erector: [Signature] Date _____

Picture or rendering must be attached depicting sign placement with before and after view.

CITY OF CHICAGO SIGN PERMIT APPLICATION CONTINUED

Section 3 continued

Dimensions of Sign Structure (i.e. cabinet, frame, awning, canopy)

Length: 42 Feet 0 Inches Height: 4 Feet 2 Inches Depth: 1 Feet 6 Inches

Area: 175 Sq Ft. Weight: 80 lbs.

Shape of Sign: REGULAR

Sign Height above Grade:

From Grade to Bottom of sign or sign structure, whichever is lowest: 12 Ft.

From Grade to Top of sign or sign structure, whichever is highest: 16'-2" Ft.

Is City Council Order required?* Yes No

*All signs in excess of 100 Square Feet in area OR in excess of 24 feet above grade require a City Council Order pursuant to Section 13-20-680 of the Municipal Code of Chicago

Dimension of Sign Elements pursuant to Section 17-12-0601 of the Chicago Zoning Ordinance:

Length: 9 Feet 9 Inches Height: 2 Feet 8 inches Area: 26 Sq Ft.

Electrical Contractor will install: Feeders: Yes No Customer Leads: Yes No

Number of Lamps: Total Wattage: Type of Lamp:

Number of Ballast/Transformers: Input of Transformers:

Type of Switch: Location of Switch:

Static: Yes No

Illuminated: Yes No

If yes - External Internal

Dynamic Image Display: Yes No

(An affidavit of compliance is required for all dynamic image display signs pursuant to Section 13-20-675(d)(2) of the Municipal Code of Chicago.)

Max Nits Max Foot Candles Message Time (Screen Hold): seconds

Self Dimming Capability: Yes No

What is the total of the sign face area devoted to dynamic image display? Sq Ft.

Section 4 Zoning Information

Zoning District or Planned Development #: RT-4

Is sign located in a special sign district? Yes No

If yes: Michigan Avenue Corridor Oak Street Corridor State Street/Wabash Avenue Corridor

Total Street frontage of Zoning Lot: 200 (Ft.)

Total Area of new sign: 175 (Sq Ft.) Gross Area of all proposed signs: 175 (Sq Ft.)

Total Area of all existing signs on Zoning Lot: 1 (Sq Ft.)

Picture or rendering must be attached depicting sign placement with before and after view.

Section 4 continues on next page

CITY OF CHICAGO SIGN PERMIT APPLICATION CONTINUED

Expediter: _____

Address: _____ License #: _____

Phone #: _____ Mobile #: _____ Email: _____

Website: _____

Section 3 - Sign and Structure Details

(Please check all that apply)

Sign Category:

On-Premise (Business ID): Dynamic Static

Business License # of Tenant Business: _____

Off-Premise (Advertising): Dynamic Static

Temporary: Special Event:

Sign will read (Please provide a description, picture and shop drawing): UPTOWN TLC, HEALTH CENTER

Type of sign (Mark all that apply):

Awning Canopy Freestanding Marquee Projecting Dynamic Image Display

Wall Painted Cabinet/Frame Vinyl Projected image Flashing

High Rise Building Hotel/Hospitals Other buildings: _____

What is the dimension of the wall on which the sign will be installed? 42' x 4'

Where is sign or sign structure mounted? Inside the building Outside the building

Is the sign or sign structure attached to a building or wall?: Yes No If yes, which wall of building? N(E)S W

Is this a freestanding sign? Yes No Location of sign on lot: N E S W

Which direction does sign copy face? N(E)S W

Does any portion of the sign, sign structure or attachments cover, obscure or obstruct an existing window in a residential unit whether occupied or not? Yes No

Does any portion of the sign, sign structure, or attachments extend on or over the public way? Yes No

If yes, what is the public way use permit number? _____

Sign Panels: Back to back within 30 degrees of parallel Yes No

Number of Faces: 1

Sign Support Structure: Pole Roof Ground Building Windows Other: _____

Does any portion of the sign or sign structure extend 24 inches above the roof line as defined in 17-17-02149 of the Municipal Code of Chicago? Yes No

Picture or rendering must be attached depicting sign placement with before and after view.

Section 3 continues on next page

SUPPLEMENTAL APPLICANT

This Supplemental Application must be completed and submitted along with the Sign Permit Application.
All fields must be completed. If a field is not applicable you must answer "n/a" in the field.



CITY OF CHICAGO
SIGN PERMIT APPLICATION
(THIS IS NOT A PERMIT)

Application Number: 100720132 Date of Application: 08-10-2017

Address of property where sign will be erected: 4920 N. KENMORE AVE

Does property have multiple addresses? Yes No

If yes, please list all addresses: 4912-4928

Is this building vacant? Yes No

If yes, is it registered under the Vacant Building Ordinance? Registration # _____

Section 1 - Applicant

Applicant is the Owner (of the real property) Lessee (of the real property)

Name of Owner of Real Property: 4920 North Kenmore Ave. LLC

Address: 4920 North Kenmore Ave, Chicago, IL 60640

Phone #: _____ Mobile #: _____ Email: _____

Name of Lessee of Real Property: Uptown Care Center LLC

Name: Barb Haimman Address: 4920 North Kenmore Ave Chicago IL 60640

Phone #: 773-769-2200 Mobile #: _____ Email: _____

Section 2 - Contractors

Payer Company of Annual Inspection Fee:

Name of Contact of Payer Company: Uptown Care Center

Name of Payer Company: Uptown Care Center Address: 4920 N Kenmore Ave Chicago

Phone #: 773-769-2700 Mobile #: _____ Email: 60640

Electrical Contractor:

Address: _____ License #: _____

Phone #: _____ Mobile #: _____ Email: _____

Website: _____

Sign Erector: CHESTERFIELD AWNING CO.

Bond #: 69908632 Registration #: N91306

Address: 16999 VAN DAM RD, SOUTH BURNHAM IL

Phone #: 708-596-4434 Mobile #: _____ Email: graphics@chesterfieldawning.com

Website: WWW.CHESTERFIELDAWNING.COM

Picture or rendering must be attached depicting sign placement with before and after view. Section 2 continues on next page



CITY OF CHICAGO
SIGN PERMIT APPLICATION
(THIS IS NOT A PERMIT)

In preparation for a new Sign Permit Application and in lieu of the "Department of Zoning and Land Use Planning - Sign Site Plan" form you must complete and submit the interim Sign Permit Application below along with the online Sign Permit Application.

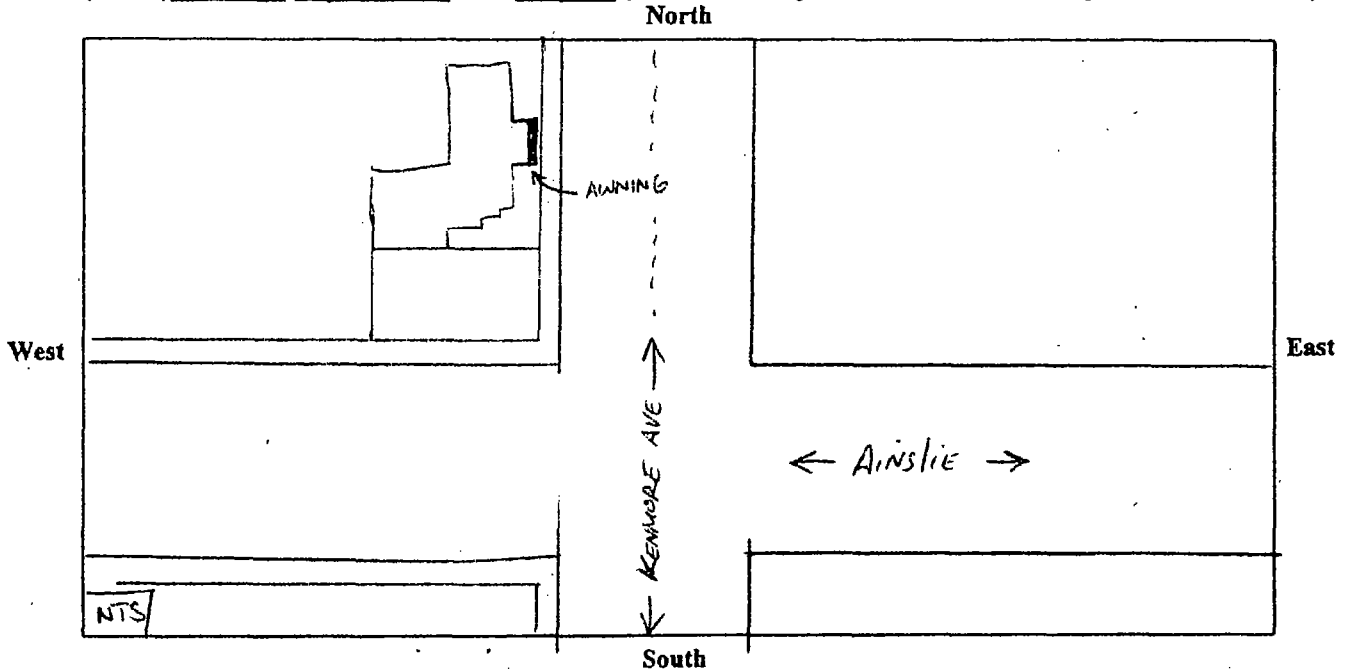
1. First, you must fill out the Sign Permit Application on-line as usual.
2. Next, you must print out this interim application and fill it out by-hand.
3. Then, you must submit both forms to the Department of Buildings for review.

**CITY OF CHICAGO
DEPARTMENT OF ZONING AND LAND USE PLANNING
SIGN SITE PLAN
(ALL INFORMATION MUST BE COMPLETED AND LEGIBLE)**

Site Address: 4920 N. KENMORE AVE _____ of _____ applications

Sign Company: CHESTERFIELD AWNING CO. Rep Name: MATT

Phone (708) 596 - 4434 EXT 208 (Below: Building, streets and location of sign on lot or structure)



SIGN USE:

Bus. ID (On-premise)

Business Lice. # _____

Advertising (Off-premise)

PERMIT TYPE:

New Construction

Change of Face _____

Previous Permit # _____

TOTAL SQUARE FOOTAGE:

Square footage of this proposed sign 175

Gross area of all proposed signs 175

Area of all existing signs
(not including proposed) on Zoning Lot 1

TYPE OF SIGN:

Flat Wall

Freestanding

Awning

Marquee

High Rise Building

Projecting Private

Projecting Public Way

Public Way Use -Permit # _____

SIGN CHARACTERISTICS:

Non-Illuminated

Illuminated

Changing Image

Video Display

Flashing

DISTANCE FROM:

Curb Line: 21'-0"

Expressway, Toll Roads
or Major Route _____

(n/a if over 1000 ft) _____

Park (over 10 acres) _____

Residential Zone _____

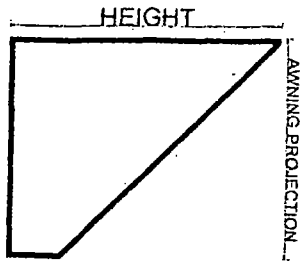
Existing Off-premise on
same side of street: _____

Signature: [Handwritten Signature]

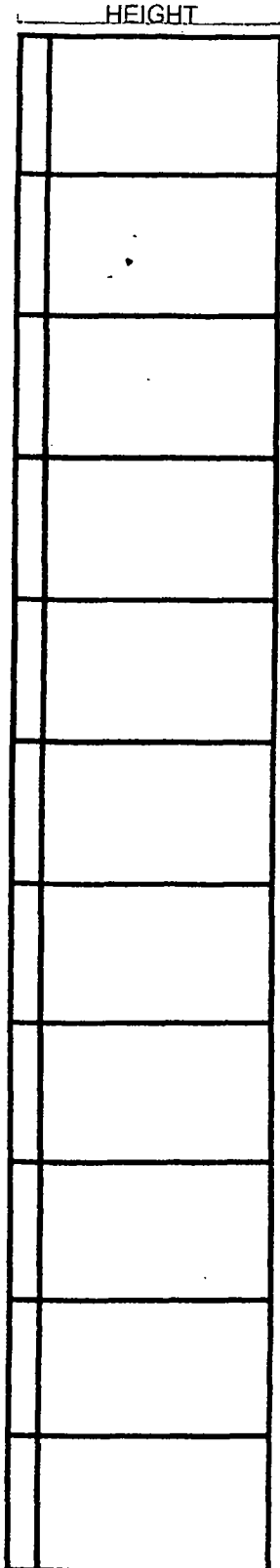
Date: _____

SAMPLE AWNING FRAME LAYOUT

SIDE VIEW

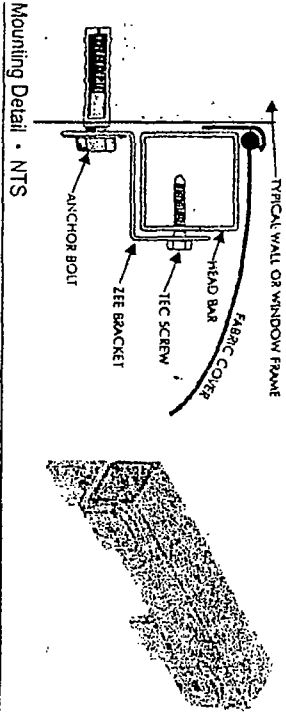


FRONT VIEW



30 in
24 in
APPROXIMATE RAFTER SPACING VARIES ON EACH AWNING
ALL RAFTERS WILL BE APPROX 24.30 INCHES APART AS NEEDED
FOR STRUCTURAL INTEGRITY

ALL METAL FRAMING MADE OF 1 X 1 SQUARE ALUMINUM



AWNING ATTACHES
TO EXISTING
MARKINGS

VERSION
1

Please carefully review and sign below if this layout meets your approval. Note that upon signing this graphics sheet you are approving this design for production. You will have approximately One (1) week from the date below to approve, before delaying production of your project.

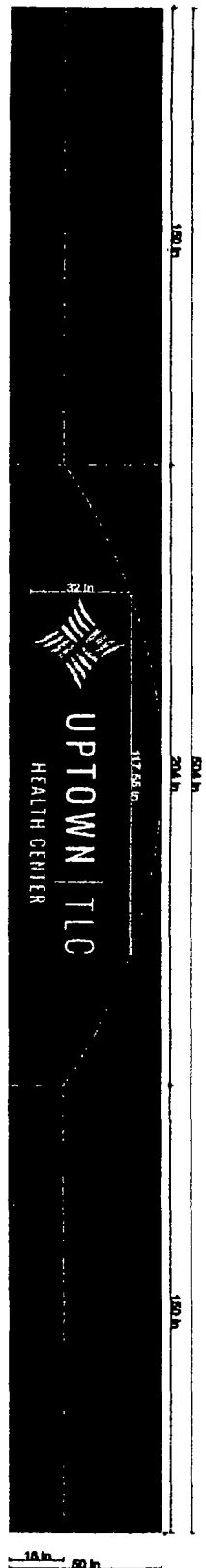
This is an original drawing created by Chesterfield Awning Company, Inc. It is being submitted for your personal use in connection with a project being planned for you by Chesterfield Awning Company, Inc. It is not to be used, reproduced, copied or exhibited in any fashion. In the event any of the above occurs, Chesterfield Awning Company, Inc. expects to be reimbursed \$250.00 in compensation for the time and effort entailed in creating this drawing.


Chesterfield Awning Co.
1699 Van Dam Rd.
South Holland, IL 60473
(708) 596-4434
www.chesterfieldawning.com

SIDE
VIEW



FRONT VIEW



JOB NUMBER

Job Name:

LP ID#:

Font Style:

Size/Style:

Color/Method:
Salesman:
Date:

Uptown TLC

Sunbrella Capn Navy 4646

Digital Print Sewn in / Diamond Logo only

PX 75 White Painted Graphics

E.R. 07-06-2017

QUESTIONS PLEASE CONTACT:
graphics@chesterfieldawning.com

PLEASE READ
Please carefully check for grammatical errors, missing fonts, placements, sizing, colors, etc.
Please note this proof is not a true representation of color.
WARNING: ANY DIGITAL PRINTING MAY VARY FROM THE ORIGINAL PRINTING. PLEASE REVIEW CAREFULLY.

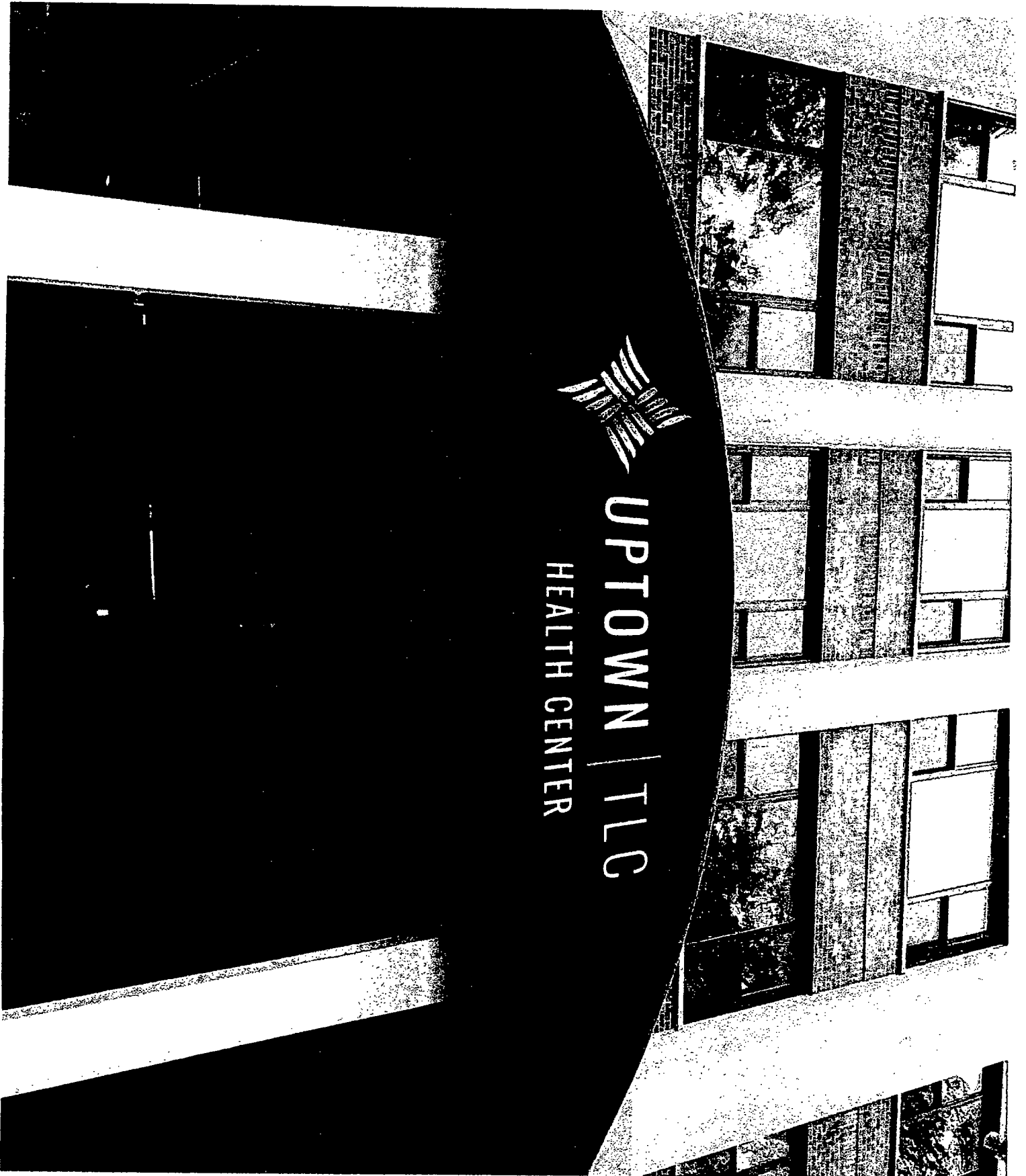
Sizes are approximate, changes can/will be made after field measuring prior to installation.

PLEASE CAREFULLY REVIEW THIS DRAWING, IF YOU APPROVE IT VIA EMAIL OR BY SIGNING IT - WITH INCORRECT INFORMATION, IT WILL BE AT YOUR EXPENSE TO CORRECT

Customer Approval: _____ Date _____

Sales Approval _____ Date _____

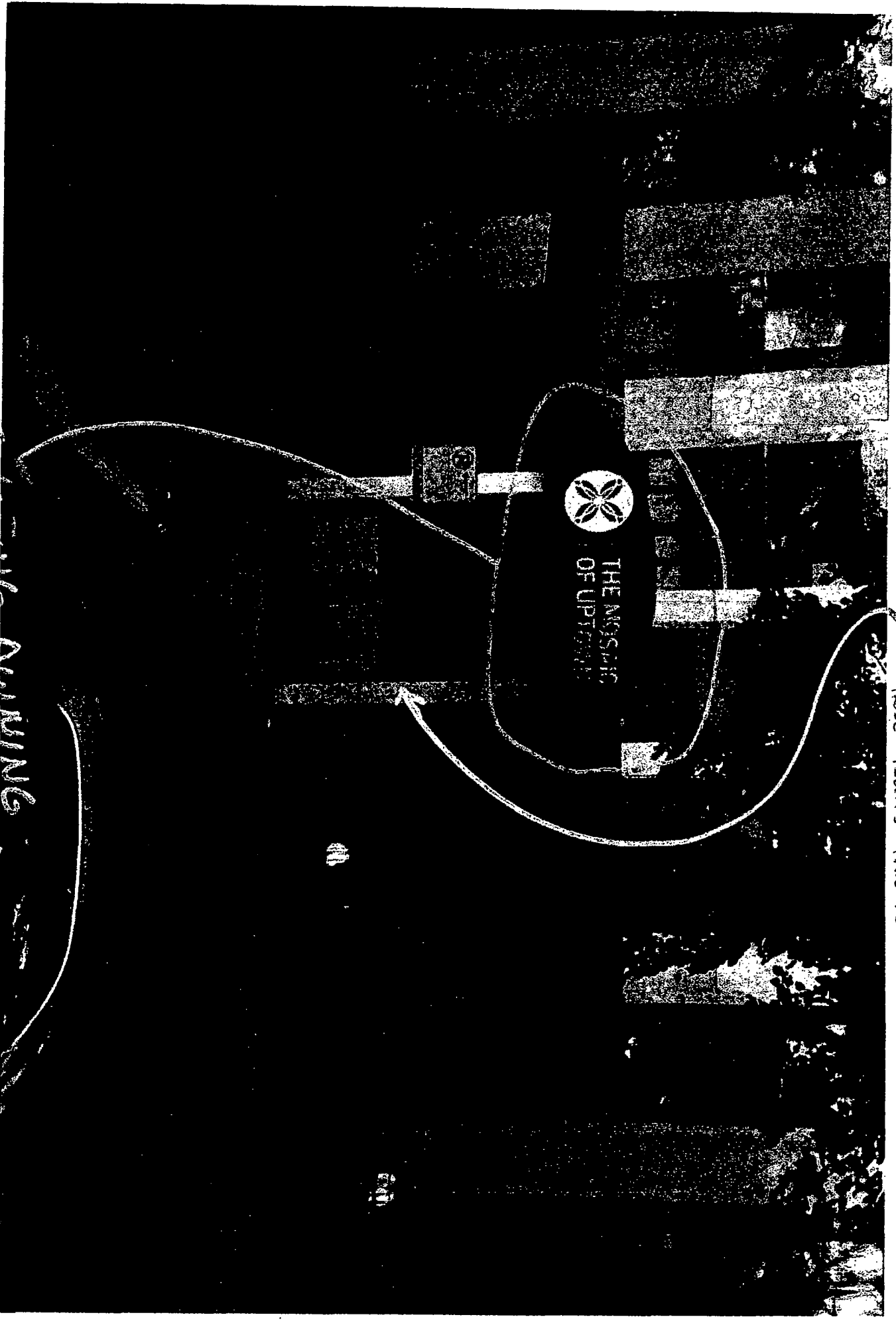
Photo RENDERING




UPTOWN | LLC
HEALTH CENTER

CONCRETE PILLARS ARE PART OF EXISTING ENTRANCE MARQUEE
OUR AWNING WOULD ATTACH TO THE EXISTING MARQUEE
THOSE PILLARS HAVE NOTHING TO DO WITH THE AWNING

EXISTING AWNING
TO BE REPLACED



TYPE OF BUSINESS OTHER _____ Other: <u>HEALTH CENTER</u> Name: <u>UPTOWN TLC</u> LIC #: _____ 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>RT4</u> Other: _____	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) _____ 200 TOTAL AREA OF NEW SIGN (SQ.FT.) _____ 175 TOTAL AREA OF ALL SIGNS ON LOT (SQ.FT.) _____ 1 HEIGHT OF SIGN ABOVE GRADE (TO TOP) _____ 16ft 2in	
DISTANCE OF CURB LINE OUTER EDGE (ft) _____ 21 DISTANCE OF STRUCTURE INNER EDGE (ft) _____ 22	SIGN CLERK _____ APPROVED FOR PERMIT _____
DISTANCE FROM (ft): A. PUBLIC PARK (OVER 10 ACRES) _____ B. EXPRESSWAY (IF LESS THAN 1,000 FT.) _____ C. RESIDENCE DISTRICT (ADVERTISING SIGNS ONLY) _____ IF REPLACEMENT SIGN OR CHANGE OF FACE, WHAT DOES THE EXISTING SIGN READ? Original Payee: _____ Landmark Hold: <input type="checkbox"/> Status: _____	REMARKS
ZONING (OFFICE USE ONLY)	



CITY OF CHICAGO

DEPARTMENT OF BUILDINGS

Sign Permit Application

APPROVAL NUMBER	APPLICATION NUMBER 100720132	ANNUAL FEE	WORK CODE	DRAWINGS ATTACHED <input type="checkbox"/> YES <input type="checkbox"/> NO
DATE OF APPLICATION 08/10/2017	TYPE OF SIGN AWNING			
ADDRESS OF SIGN 4920 N KENMORE AVE. 60640-	LENGTH 42	IN.	HEIGHT 4	IN. 2
BUILDING	ORIGINAL PERMIT NUMBER	AREA 175	WEIGHT	LBS 80
TYPE OF PERMIT NEW CONSTRUCTION (SIGN)	SIGN HEIGHT ABOVE GRADE/ROOF			FT. 12
PAYER OF ANNUAL INSPECTION HEMEMENN, BART 4920 N KENMORE AVE. CHICAGO, IL 60640 (773)769-2700	SHAPE OF SIGN REGULAR			
SIGN MANUFACTURER CHESTERFIELD AWNING CO	SIGN WILL READ UPTOWN TLC HEALTH CENTER			
ADDRESS WHERE SIGN CAN BE SEEN PRIOR TO ERECTION	NO. OF LAMPS	TOTAL WATTAGE		
TICKET NUMBER 0	REINSPECTION CONTROL NUMBER	TYPE OF LAMP		
TYPE OF SUPPORT FOR SIGN AWNINGS	NO. OF BALLAST/TRANSFORMERS	INPUT OF TRANSFORMERS		
SIGN BOARD SUPPORT MEMBERS OTHER	CONTRACTOR WILL INSTALL	<input checked="" type="checkbox"/> LEADERS <input checked="" type="checkbox"/> CUSTOMER LEADS		
ANNUAL FEE	TYPE OF SWITCH			
CONSTRUCTION FEE 1017 B FEE	LOCATION OF SWITCH			
TOTAL FEE	SIGN LOCATION CANVAS AWNING MADE AND INSTALLED FACING EAST (EVEREST GROUP / UPTOWN TLC)			
AMOUNT PAID	Check # for Zoning			
BALANCE DUE	Check # for DCAP			

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

REG NO	BOND NO	REG NO	N91306
ELECT CONTR	SIGN ERECTOR CHESTERFIELD WINDOW	SIGNER	
ADDRESS	ADDRESS 16999 VAN DAM ROAD SOUTH HOLLAND IL, 60423-		
SUPERVISOR SIGNATURE	SIGNATURE		

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
Rahm Emanuel, Mayor



Department of Buildings
Judith Frydland, Commissioner