

# Office of the Chicago City Clerk



Or2012-261

## Office of the City Clerk

## City Council Document Tracking Sheet

**Meeting Date:** 

5/9/2012

Sponsor(s):

Jackson, Sandi (7)

Type:

Order

Title:

Issuance of permits for sign(s)/signboard(s) at 2320 E 93rd

St

Committee(s) Assignment:

Committee on Zoning, Landmarks and Building Standards

## Committee on Buildings May 9, 2012

(signs)

ORDERED, That the Commissioner of Buildings is hereby directed to issue a sign permit to:

Shaw Electric Sign Company

356 Prairie Mist Drive

Round Lake, IL 60073

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

**Advocate Trinity Hospital** 

2320 East 93rd Street

Chicago, IL 60617

Dimensions:

Length: 32' - 10"

Height: 3' - 11"

Height above grade/roof to top of sign: 20'

**TOTAL SQUARE FOOT AREA: 128.5 SF** 

Such sign(s) shall comply with all applicable provisions of 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.

lderman, 7<sup>th</sup> Ward,

whose ward your proposed use of the public way is located.



OFFICE USE ONLY

## APPLICATION TO USE THE PUBLIC RIGHT OF WAY

Please enclose one sketch of each proposed use of the public way, which maps to scale the proposed use(s) and its relationship to surrounding right-of-way. All measurements must be indicated.  The prints should also accurately depict the location of the property line and public facilities (metericle) certify that all statements made as part of the application, and the attachments hereing true to the best of my knowledge and bellef.					DOB PERMIT #:	ļ <u> </u>	
RAIL NAME OF ENTITY: EAST To juy Hospital RMIT MAILING ADDRESS: 3230 E 92/d St Y: Chicaso STATE: IL ZIP CODE: COCHT NTACT PERSON: DOWN AMERICATION THE PROPERTY HOSPITAL  WILDING OWNER INFORMATION  ME: EHS Trinity Hospital DRESS: 3320 E 93/d st Y: Chicaso STATE: IL ZIP CODE: GDG17  ONE: 772-967-3600 FAX: NA E-MAIL: M/T  SE OF THE PUBLIC WAY  List the proposed or existing use below and complete the worksheet on page 3. Use only one application for all public way use type:  PE HOW MANY? BUILDING ADDRESS  PIease enclose one sketch of each proposed use of the public way, which maps to scale the proposed use(s) and its relationship to surrounding right-of-way. All measurements must be indicated.  The prints should also accurately depict the location of the property line and public facilities (metalight poles, sidewalks).  PPLICANT CERTIFICATION  Bereby certify that all statements made as part of the application, and the attachments hereing true to the best of my knowledge and bellef.  TITLE: Agent					AMNESTY ELIGIBLE?	O YES	סאס
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ME: EHS Tristy Hospital  DRESS: 2220 E. 9370 st  TY: (hilds) STATE: IL ZIP CODE: (606) 7  ONE: 772-967-200 FAX: NA E-MAIL: M/t  SE OF THE PUBLIC WAY  List the proposed or existing use below and complete the worksheet on page 3.  Use only one application for all public way use type:  PE HOW MANY? BUILDING ADDRESS  Please enclose one sketch of each proposed use of the public way, which maps to scale the proposed use(s) and its relationship to surrounding right-of-way. All measurements must be indicated.  The prints should also accurately depict the location of the property line and public facilities (metellight poles, sidewalks).  PPLICANT CERTIFICATION  Pereby certify that all statements made as part of the application, and the attachments hereing true to the best of my knowledge and belief.  TITLE: Agent				74-257-27	LE-MAIL: are	_ Orifess	Spool Del
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nert of this application process. You are required to notify/obtain approval from the Alderman in				Lancour C		. Alai	_ •_



WARD:



#### APPLICATION WORKSHEET

- I For use by NEW APPLICANTS ONLY.
- For renewals obtain form from City Hall, 121 N. LaSaile St., Rm. 800 or call (312) 74 GOBIZ (744-5249)

Complete the worksheet for each use of the public way and indicate all applicable measurements.

	Exact Street (Le. S. State St.)	Quantity	Length of structure along public way	Height of structure	Depth of structure	Height above grade	Total depth over public way	Is this sign(s) Illuminated? (Y/N)	Is this an Existing Public Way Use (Y.N)
SIGNES	Sign C:130 E: 93 rd st E: 93 rd st	1	33'- 33'- 16''	311	6"	16'	9" 9"	3-0-	٧: ٧-
CANOPIES / AWNINGS									
LIGHTS									

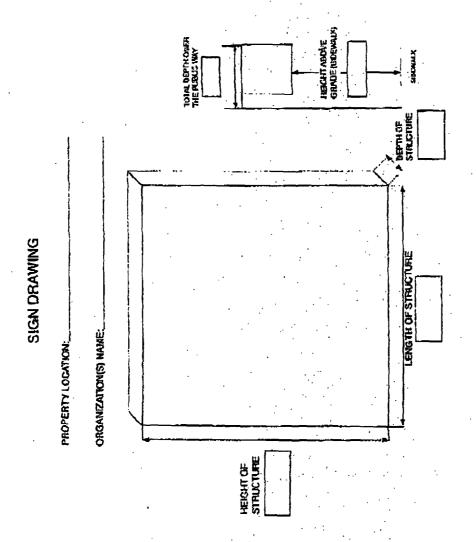
#### See example of required plans beginning on page 5.

NOTE: Pursuant to section 2-154-030 of the Municipal Code of the City of Chicago the Corporation Counsel of the City of Chicago may require any such additional information from any applicant to achieve full disclosure relevant to the request for action by the City Council or other city agency. Pursuant to section 2-154-020 of the Municipal code of the City of Chicago any material change in the information required above must be provided by supplementing this statement at any time up to the time the City Council or any city agency takes action on the application.





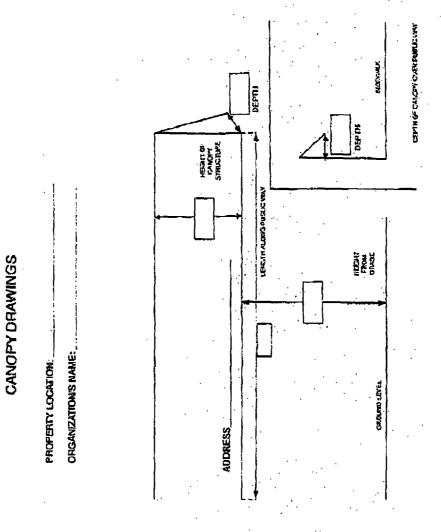
#### **EXAMPLE OF SIGN DRAWING**







#### **EXAMPLE OF CANOPY/AWNING DRAWING**







#### **EXAMPLE OF LIGHT(S) DRAWING**

