

Office of the City Clerk



Or2013-25

Office of the City Clerk

City Council Document Tracking Sheet

Meeting Date: 1/17/2013

Sponsor(s): Thompson, Joann (16)

Type: Order

Title: Issuance of permits for sign(s)/signboard(s) at 5700 S

Western Ave

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

CITY COUNCIL MEETING Introduced January 17, 2013

Ordered, That the commissioner of buildings is herby authorized and directed to issue

A sign permit to:

Awings Express 8029 S. Western Ave. Chicago, IL 60620

For the erection of a sign/signboard over 24 feet in height and/or 100 square feet in the area of one facet at:

Mexico Sons Mufflers & Brakes 5700 S. Western Avenue Chicago, IL 60636

Dimensions:

Length: 65 Ft

Height: 7 Ft

Height above grade/roof to top of sign: 9 FT

Total Square Foot Area: 455 Sq Ft

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

JoAnn Thompson Alderman, 16th Ward

OFFICE USE ONLY

DOB PERMIT #:

CITY OF CHICAGO · BACP-PWU · BUNDLE PERMIT APPLICATION · V.09.28.10

APPLICATION TO USE THE PUBLIC RIGHT OF WAY



	AMNESTY ELIGIBLE?	Ú YES	ONE			
APPLICANT INFORMATION						
APPLICANT INFORMATION						
LEGAL NAME OF ENTITY: Mexico Sons Muffler	5 + Brak	<u>e5</u>				
PERMIT MAILING ADDRESS: 5700 S. Western Ave.						
CITY: Chicago STATE: Illinois	ZIP CODE: 6	<u>0636</u>				
	TITLE:					
PHONE: 773. 737. 9300 FAX: 773. 737. 9304	E-MAIL:					
BUILDING OWNER INFORMATION						
NAME: Martin Morganski						
ADDRESS: 5/21 S. 17th Ave.						
	ZIP CODE: 3	36/9				
PHONE: 7/5.520.7159 FAX:	E-MAIL:					
 USE OF THE PUBLIC WAY List the proposed or existing use below and complete the workshed Use only one application for all public way use type. 	et on page 3.					
TYPE HOW MANY? BUILDING ADDRESS						
	we.					
1913911			 			

 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 (moters, light poles, sidewalks).						
APPLICANT CERTIFICATION						
· · · · · · · · · · · · · · · · · · ·						
I hereby certify that all statements made as part of the application, are true to the best of my knowledge and bellef.	and the attachi	nents ne	rein,			
BY: Marin Mez	ITLE: MAN	16ER				
ALDERMAN'S APPROVAL		•				
As part of this application process, you are required to notify/obtain app	roval from the Al	derman i	n			
whose ward your proposed use of the public way is located.						
ALDERMAN'S SIGNATURE:						
ALCCHMAN DURING LUCE. I \ ' \ MATTER '						



CITY OF CHICAGO . BACP-PWU . BUNDLE PERMIT APPLICATION . V.09.28,10

<u>APPLICATION TO USE THE PUBLIC RIGHT OF WAY</u>

APPLICATION WORKSHEET

- For use by NEW APPLICANTS ONLY.
- For renewals obtain form from City Hall, 121 N. LaSalle St., Rm. 800 or call (312) 74 GOBIZ (744-6249)

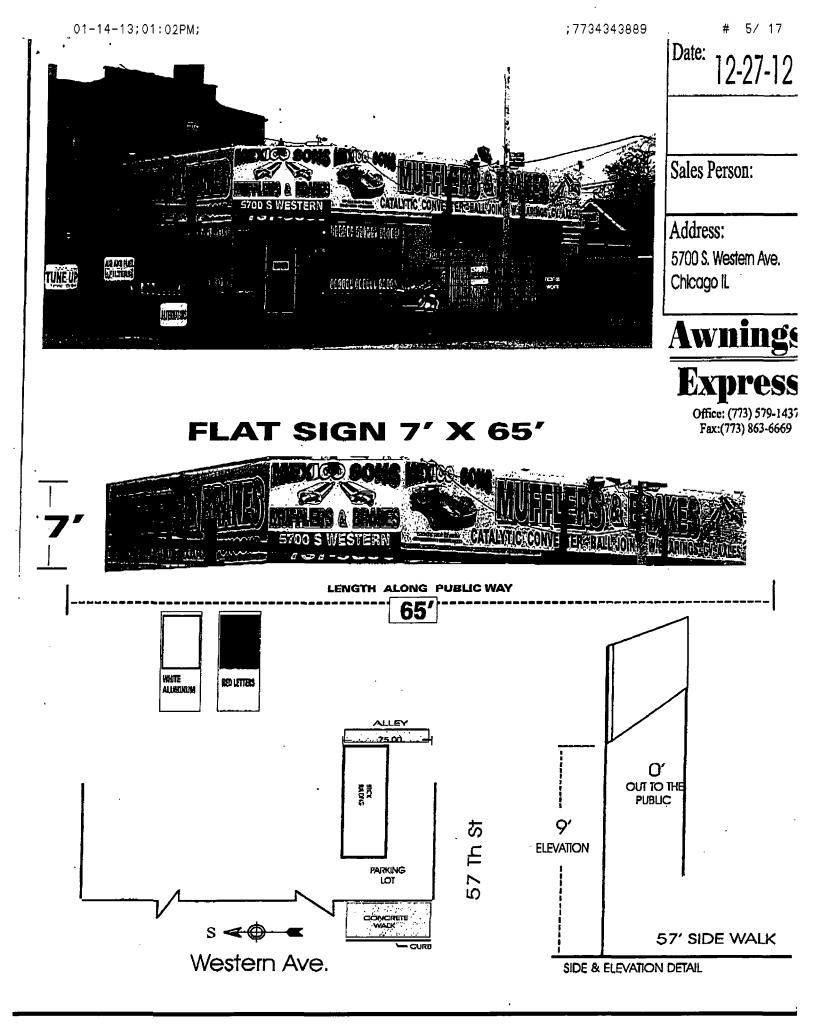
Complete the worksheet for each use of the public way and indicate all applicable measurements.

	Exact Street (i.e. S. State St.)	Quantity	Length of structure along public way	Height of structure	Depth of structure	Helght above grade	Total depth over public way	Is this sign(s) Illuminated? (Y/N)	ls this an Existing Public Way Use (Y/N)
SIGNS	5700 S. Western Ave.	1	45'	7	\ \(\tau^{\tau} \)	9'	. 0	No	Ye5
CANOPIES I AWNINGS									
LIGHTS	-								

Soo 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.





CITY OF CHICAGO - BACP-PWU - BUNDLE PERMIT APPLICATION - V.09.28.10

APPLICATION CHECKLIST (continued)

Martin

F.E.I.N. or SOCIAL SECURITY NUMBER:

Acceptance Letter



ACCEPTANCE OF GRANT OF PRIVILEGE PERMIT TERMS

I hereby understand and accept the terms and conditions relative to the issuance of the permit, and by signing below, I acknowledge the receipt of a copy of the Municipal Code of Chicago's 10-28 and 13-20 regulations, as well as all the additional requirements promulgated herein:

I understand it shall be my duty as the permit holder, and as a condition of the permit, to:

- 1. Comply with all the requirements defined within Chicago's Municipal Code, the Rules and Regulations, as well as the requirements promulgated herein;
- 2. Upon the passage of the permit ordinance at City Council, pay the non-refundable applicable Grant of Privilege annual permit fee.
- 3. Upon the submission of the permit application the applicant shall furnish the certificate of insurance; and,
- 4. Resolve all Account Holds since failure to do so will prevent the processing of this permit application;
- 5. Install or maintain the grant of privilege after the issuance of the permit by the Commissioner of Business Affairs and Consumer Protection;
- I hereby agree to accept the terms and conditions relative to Issuance of the permit.
- I agree to renew the Certificate of Insurance at least 10 days prior to expiration of the policy.
- I understand that if the item or items are not constructed/maintained the permit fees will not be refunded.

I understand that failure to adhere to all conditions imposed in the permit may result in revocation of the permit

DATE:

TITLE:

MAURGER

ACCOUNT #:		SITE#	•
LEGAL NAME OF ENTITY: A	lartin Meza		•
	Texica Sons	Mufflers + Brakes	•
BUSINESS LOCATION ADDRE		Western Ave.	•
CITY: Chicago	STATE: Illinois	ZIP CODE: 60636	
BUSINESS PHONE: 773	737-9300		•
E-MAIL:		PERMITTYPE: Hat Sign	•



SIGNATURE:

PRINT NAME:



8028 S. Western Av. 60620

Office (773) 579-1437 Fex (773) 863-6669

Veronica D.