



# City of Chicago



Or2014-228

Office of the City Clerk

## Document Tracking Sheet

<b>Meeting Date:</b>	5/28/2014
<b>Sponsor(s):</b>	Harris (8)
<b>Type:</b>	Order
<b>Title:</b>	Issuance of permits for sign(s)/signboard(s) at 9000 S Stony Island Ave
<b>Committee(s) Assignment:</b>	Committee on Zoning, Landmarks and Building Standards

**Committee on Zoning, Landmarks, and Building Standards**

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

**Midwest Sign & Lighting, Inc.  
4910 W. WILSHIRE BLVD.  
COUNTRY CLUB HILLS, IL 60448**

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


**PRESENCE MEDICAL  
9000 S, STONY ISLAND AVENUE  
CHICAGO, IL 60617**

**Dimensions: Length 34'-3 1/4" Height 4'**

**Height above grade / roof to top of sign 11' TO BOTTOM OF SIGN FROM GRADE**

**TOTAL SQUARE FOOT AREA 137 SQUARE FEET**

**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, sign boards and structures.**

  
**Alderman Approval**



## APPLICATION CHECKLIST (continued)

☐ 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.

SIGNATURE: Bob Hauptman DATE: \_\_\_\_\_  
 PRINT NAME: BOB HAUPTMAN TITLE: Vice President

ACCOUNT #: \_\_\_\_\_ SITE #: \_\_\_\_\_  
 LEGAL NAME OF ENTITY: Presence Health  
 BUSINESS NAME (DBA): Presence Health  
 BUSINESS LOCATION ADDRESS: 9000 STONY ISLAND  
 CITY: Chicago STATE: Illinois ZIP CODE: \_\_\_\_\_  
 BUSINESS PHONE: 847-668-8525  
 E-MAIL: \_\_\_\_\_ PERMIT TYPE: PUBLIC WAY



# APPLICATION TO USE THE PUBLIC RIGHT OF WAY

## APPLICANT INFORMATION

- LEGAL NAME OF ENTITY: Presence Health  
 - PERMIT MAILING ADDRESS: 5747 Dempster  
 - CITY: Morton Grove STATE: IL ZIP CODE: 60053  
 - CONTACT PERSON: LARRY LATAS TITLE: Syst. Director  
 - PHONE: 847-568-8525 FAX: 847-568-8545 E-MAIL: LLATAS@PresenceHealth.Org

## BUILDING OWNER INFORMATION

- NAME: Presence Health  
 - ADDRESS: 5747 Dempster  
 - CITY: Morton Grove STATE: IL ZIP CODE: 60053  
 - PHONE: 847-568-8525 FAX: 847-568-8545 E-MAIL: LLATAS@PresenceHealth.Org

## USE OF THE PUBLIC WAY

1. List the proposed or existing use below and complete the worksheet on page 3.  
Use only one application for all public way use type.

TYPE	HOW MANY?	BUILDING ADDRESS
<u>SIGN</u>	<u>ONE</u>	<u>9000 STONY ISLAND</u>

2. 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 (meters, light poles, sidewalks).

## APPLICANT CERTIFICATION

I hereby certify that all statements made as part of the application, and the attachments herein, are true to the best of my knowledge and belief.

BY: Robert M. Houghton TITLE: System's President  
 F.E.I.N. or SOCIAL SECURITY NUMBER: \_\_\_\_\_

## ALDERMAN'S APPROVAL

As part of this application process, you are required to notify/seek approval from the Alderman in whose ward your proposed use of the public way is located.

ALDERMAN'S SIGNATURE: Michelle A. Harris  
 DATE: 4/29/14 WARD: 8th

Approval shall not be withheld for any reason relating to the temporary, confined or temporary contained in or required by the sign, canopy, awning, banner or marquee for which the permit is sought. If a statement signifying approval is not received by BACP within 60 days of the receipt of the application to the Alderman, provided the application is complete and accurate and the applicant is not in violation of any provision of the Municipal Code, the applicant shall be deemed approved by the BACP and protected for submission to the City Council as a Mayor's introduction.

☐ Approve | Reason(s): \_\_\_\_\_  
☐ Do Not Approve | Reason(s): \_\_\_\_\_





# APPLICATION TO USE THE PUBLIC RIGHT OF WAY

## 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	Height above grade	Total depth over public way	Is this sign(s) illuminated? (Y/N)	Is this an Existing Public Way Use (Y/N)
SIGNS	9000 STONY ISLAND	1	34'-3 1/2"	4'	6"	11'	6"	Y	N
CANOPIES/AWNINGS									
LIGHTS									

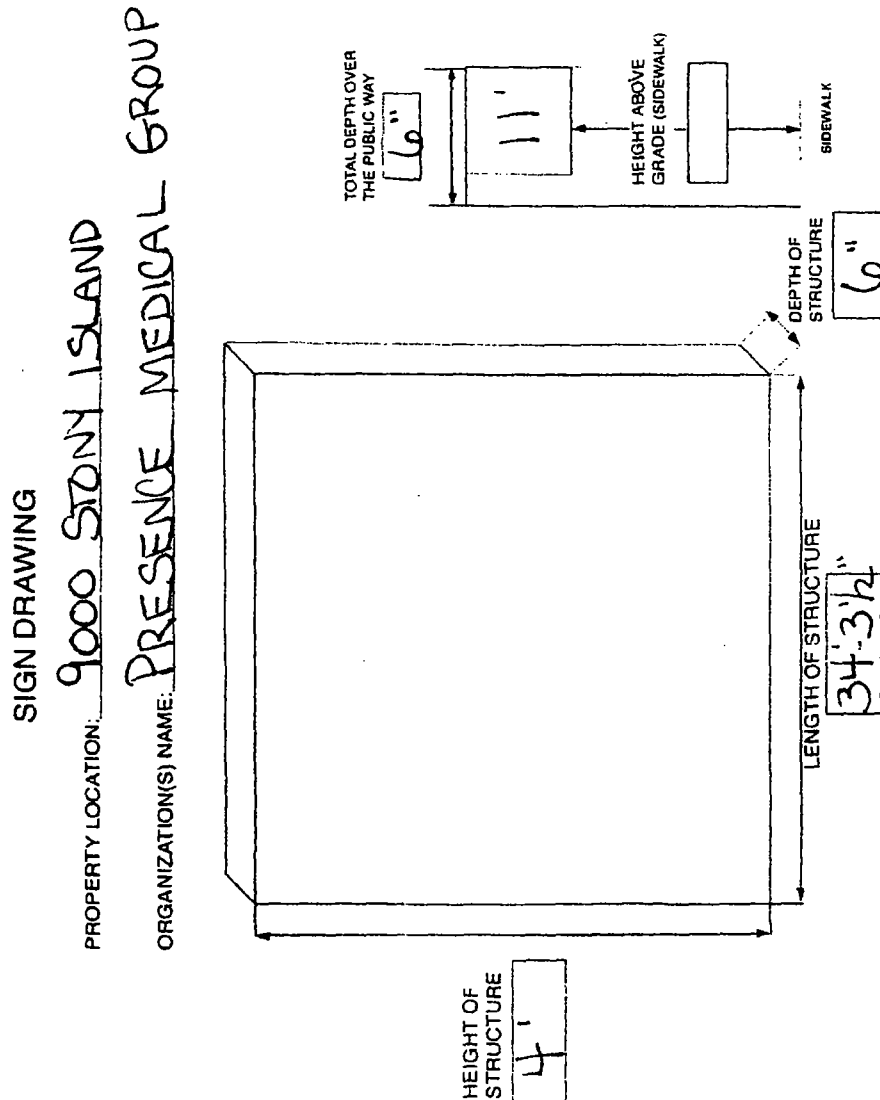
See example of required plans beginning on the next page.

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.



## APPLICATION TO USE THE PUBLIC RIGHT OF WAY

### **EXAMPLE OF SIGN DRAWING**



SIGN SPECIFICATIONS

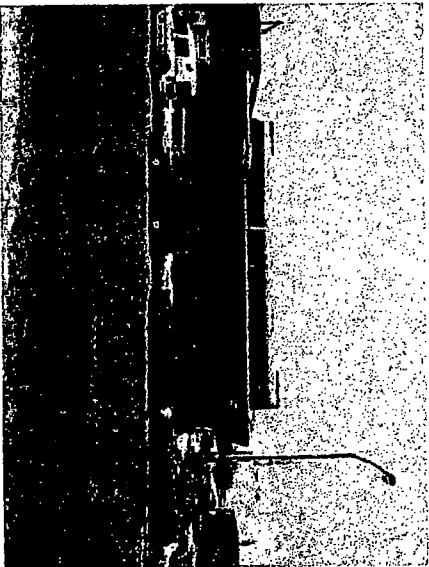
(A) - ILLUMINATED LETTERS

Lighting: LED  
Voltage: 120v  
Description: Face-Lit (Acrylic) Raceway  
paint to match PMS 7518c  
Face Color: White  
Return Color: P3  
Installation: letters flush to raceway

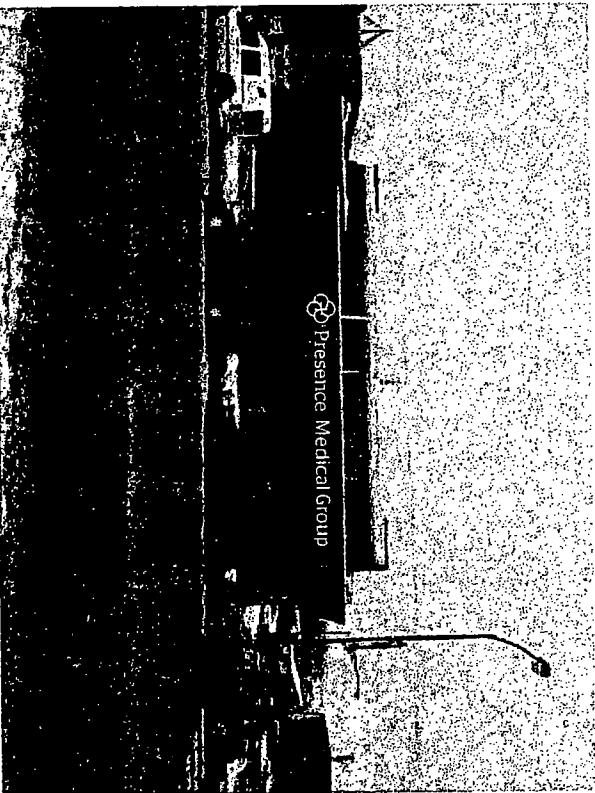
(B) - ILLUMINATED LOGO

Lighting: LED  
Voltage: 120v  
Description: Face-Lit (Acrylic) Raceway  
paint to match PMS 7518c  
Face Color: White  
Return Color: P3  
Trimcap Color: P3  
Installation: Logo flush to raceway

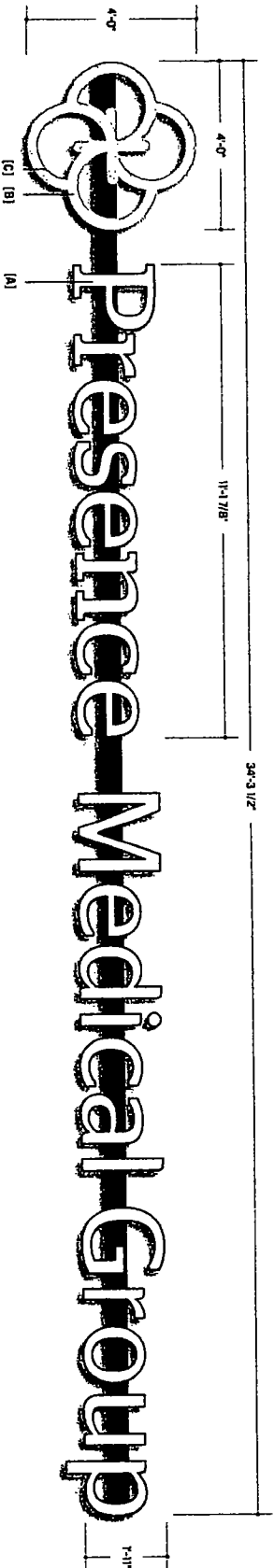
(C) - GRAPHICS/LOGO  
Vinyl Graphics V5, V6, (2 x V7), V8  
leaving thin white outline  
to eliminate night hazing



Existing



Proposed



Vinyl detail callout



9000 S. Stony Island Avenue, Suite 200  
Chicago, IL 60617

The information is provided by the client. The information contained herein is for informational purposes only and does not constitute an offer of any financial product or service. The information is not intended to be used as a basis for investment decisions. The information is not intended to be used as a basis for investment decisions. The information is not intended to be used as a basis for investment decisions.

Product

Presence - PM8

9000 S. Stony Island Avenue  
Chicago, IL 60617

Scale: 1/4" = 1'-0"  
Original Page Size: 11" x 17"

Notes

Remove ribs as needed to mount  
raceway flush to wall

Revisions	BY	DATE
REV DESCRIPTION	REV	DATE
01. DESIGN	REV	02/20/13
02. CONSTRUCTION	REV	02/20/13
03. CARRY-OUT	REV	02/20/13

By: Katie Conroy  
Drawn By: Sarah Watson  
Orig Date: 11/25/13

PL123rwl

Lit Letters

Sign Type

63926 J01

DRP - Project - Job No

Design

63926	S0
PP-Project: at no	5100