## City of Chicago



Or2018-550

## Office of the City Clerk

## Document Tracking Sheet

## Meeting Date:

10/31/2018

## Sponsor(s):

Type:
Title:
Committee(s) Assignment:

Osterman (48)
Order
Issuance of permits for sign(s)/signboard(s) at 5206 N Broadway
Committee on Zoning, Landmarks and Building Standards

## CITY COUNCIL COMMITTEE ON ZONING, LANDMARKS AND BUILDING STANDARDS

## COUNCIL ORDER

RE: Approval of sign over $\mathbf{1 0 0}$ square feet in area or over $\mathbf{2 4}$ 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: 5206 N Broadway Chicago, IL 60640

Zoning District: B1-2
DOB Sign Permit Application \#: 100789630
Sign Details:

1. On-premise $X$

OR Off-premise $\qquad$
2. Static sign $X \quad O R \quad$ Dynamic-image display sign $\qquad$
3. Number of sign faces 1
4. Projecting over the public way No (Yes or No) If yes, Public Way Use \#: $\qquad$
5. Dimensions: Length 18 feet $\underline{8}$ inches Height 6 feet 0 inches Total square feet in area: 112 feet ___ inches
6. Height above grade: 13 feet $\qquad$ inches
7. Elevation (side of building or lot where the sign will be erected): $\qquad$
East
8. Name of Sign Contractor/Erector: Poblocki Sign Company

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 successgrs to comply shall be grounds for invalidation or revocation of the sign permit.


| SIGN SPECIFICATIONS |
| :---: |
| (A) - CAbinet |
| Lighting tit |
| Material Aluminum |
| Face Color: Panted MP 30399 Silver Grey (5M 2132-60) |
| Cabinet Color: Painted MP 30399 Silver Grey (8M 2132-60) |
| installation Wall mount |
| [日] - LOGO/ PORTAL/ RULELINE/ U H.S |
| Material: $3 / 4^{\circ}$ clear push thru / $1 / 2^{\circ}$ proud of lace |
| Color 70 diffuser applied second surface and black vinyl with outine applied first surlace |
| [C]-LOGO/ WAVE/ NORTHSHORE |
| Materiat $3 / 4^{\circ}$ clear push thru / $1 / 2^{\circ}$ proud of face |
| Color 70 diffuser applied second surlace and Intense Blue 3630-127 vinyl with outine 3pplied first surface |
| [D] - immediate care cabinet |
| Materia! Aluminum |
| Color. Paint To Match 3M Perfect Red |
| 7725-283 |
| Copy• Push-thru Clear (1/2* Proud of Facel |
| W'th White Vinyl First Surface [Sight Outine] |
| And 70 Diffuser Second Surface |






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II
NORTHSHORE

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