



City of Chicago



Or2019-317

Office of the City Clerk

Document Tracking Sheet

Meeting Date:	9/10/2019
Sponsor(s):	Harris (8)
Type:	Order
Title:	Issuance of permits for sign(s)/signboard(s) at 8550 S Stony Island Ave
Committee(s) Assignment:	Committee on Zoning, Landmarks and Building Standards

CITY COUNCIL
COMMITTEE ON ZONING, LANDMARKS AND BUILDING STANDARDS

COUNCIL ORDER

RE: Approval of sign over 100 square feet in area or over 24 feet above grade

ORDERED, that the City Council hereby approves the following sign application submitted by:

Applicant*: ELITE REHABILITATION INSTITUTE

(* 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: 8550 S DUNY ISLAND AVE Chicago, IL 60617

Zoning District: B3-2

DOB Sign Permit Application #: 100753020

Sign Details:

1 On-premise ☒ OR Off-premise ☐

2 Static sign ☒ OR Dynamic-image display sign ☐

3. Number of sign faces 1

4. Projecting over the public way No (Yes or No) If yes, Public Way Use #:

5. Dimensions. Length 36 feet 0 inches Height 5 feet 0 inches

Total square feet in area: 180 feet inches

6. Height above grade. 9 feet 0 inches

7. Elevation (side of building or lot where the sign will be erected): EAST

8. Name of Sign Contractor/Erector: CHASTERFIELD AWNING CO.

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

Michelle Harris
Alderman

8th
Ward



CITY OF CHICAGO

DEPARTMENT OF BUILDINGS

Sign Permit Application

APPROVAL NUMBER	APPLICATION NUMBER 100753020	ANNUAL FEE	WORK CODE	DRAWINGS ATTACHED ☐ YES ☐ NO								
DATE OF APPLICATION 03/22/2018			TYPE OF SIGN AWNING									
ADDRESS OF SIGN 8550 S STONY ISLAND AVE. 60617-			<table border="1"> <tr> <td>FEET</td> <td>IN</td> <td>FEET</td> <td>IN</td> </tr> <tr> <td>36</td> <td>0</td> <td>5</td> <td>0</td> </tr> </table>		FEET	IN	FEET	IN	36	0	5	0
FEET	IN	FEET	IN									
36	0	5	0									
BUILDING	ORIGINAL PERMIT NUMBER DONTKNOW	<table border="1"> <tr> <td>WIDTH</td> <td>HEIGHT</td> </tr> <tr> <td>180</td> <td>90</td> </tr> </table>			WIDTH	HEIGHT	180	90				
WIDTH	HEIGHT											
180	90											
TYPE OF PERMIT CHANGE OF FACE			SUBJECT CODE - OTHER CATEGORY									
PAYER OF ANNUAL FEE IS: FLECK, MICHAEL 8550 S STONY ISLAND AVE CHICAGO, IL 60617 (773)359-2085			SIGN TYPE REGULAR									
SIGN MANUFACTURER CHESTERFIELD AWNING CO			SIGN TYPE - OTHER LITTLE REHABILITATION INSTITUTE ACCIDENT & INJURY C									
ADDRESS WHERE SIGN CAN BE SEEN FROM THE STREET			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
TOTAL NUMBER	PERMIT NUMBER - ORIGINAL NUMBER	SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER										
0		SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER										
TYPE OF SIGN - OTHER AWNINGS			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
SIGN TYPE - OTHER OTHER			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
ANNUAL FEE			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
CONSTRUCTION FEE			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
240.00			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
DAILY FEE			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
240.00			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
TOTAL FEE			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
240.00			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
AMOUNT PAID			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
200.00			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
BALANCE DUE			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									
\$ 40.00			SIGN TYPE - OTHER SIGN TYPE - OTHER SIGN TYPE - OTHER									

The undersigned certifies that the statements in this application are true and correct and that all work done in accordance with the permit will conform to the requirements of the Chicago Municipal Code.

SIGNATURE ADDRESS SUPERVISOR SIGNATURE	LICENSE # N91306 COMPANY NAME CHESTERFIELD WINDOW ADDRESS 16999 VAN DAM ROAD SOUTH HOLLAND IL 60423 SIGNATURE
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*IF APPLICABLE

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, MayorDepartment of Buildings
Judith Frydland, Commissioner

TYPE OF BUSINESS COMMERCIAL _____ Other <u>PHYSICAL THERAPY</u>		SIGN BOND REQUIRED? ☐ YES	
Name <u>ELITE REHABILITATION INSTITUTE</u>		COUNCIL ORDER REQUIRED? ☒ YES	
LIC # _____		IS SPECIAL PERMISSION REQUIRED FOR OTHER ELECTRICAL?	
Renewal Date _____		☐ YES	
Projects Over ☒ Private Property		IF YES, ATTACH LETTER OF REQUEST	
☒ Public Way Grant Permit # _____		TIME STAMP	
☐ Planned Development Manufacturing PMD-PD# _____			
Zoning District <u>B3</u> Other <u>B3-2</u>			
TYPE OF SIGN ☐ ADVERTISING ☐ IDENTIFICATION ☐ NEGATIVE			
☒ BUSINESS ☐ TRANSIT			
TOTAL STREET FRONTAGE OF LOT (IN FEET) _____ 51			
TOTAL AREA OF NEW SIGN (SQ FT) _____ 180			
TOTAL AREA OF ALL SIGNS ON LOT (SQ FT) _____ 1			
HEIGHT OF SIGN ABOVE GRADE (TO TOP) _____ 14ft 0in			
DISTANCE OF CURB LINE OF STREET EDGE (ft) _____ 62		SIGN CLERK _____	
DISTANCE OF STRUCTURE INNER EDGE (ft) _____ 64		APPROVED FOR PERMIT _____	
DISTANCE FROM (ft) A. PUBLIC PARK (OVER 10 ACRES) _____ B. EXPRESSWAY (LESS THAN 1000 FT) _____ C. RESIDENTIAL DISTRICT (ADVERTISING SIGNS ONLY) _____ 80		REMARKS	
IF REPLACEMENT SIGN OR CHANGE OF FACE, WHAT DOES THE EXISTING SIGN READ? NYC GROCERY DELI CELLULAR			
Original Payee: <u>DONT KNOW THIS IS NEW TENNANT</u>			
Landmark Hold. ☐ Status: _____			
ZONING (OFFICE USE ONLY)			



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.

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: 100753020 Date of Application: 3/22/2016

Address of property where sign will be erected: 8550 S. STONY ISLAND AVE

Does property have multiple addresses? ☒ Yes ☐ No

If yes, please list all addresses: 8548-8554

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: Mohamad Nasser

Address: 10958 W 168th St, Orland Park IL 60467

Phone # 773-392-1808

Mobile # _____

Email _____

Name of Lessee of Real Property: Elite Rehabilitation Institute

Name: Michael Fleck

Address: 1100 Lake St, Suite 120 Oak Park IL 60301

Phone # 773-359-2085

Mobile # 262-497-5165

Email: elite.stony.island@gmail.com

Section 2 - Contractors

Payer Company of Annual Inspection Fee:

Name of Contact of Payer Company: Michael Fleck

Name of Payer Company: Elite Rehabilitation Institute Address: 8550 S Stony Island Ave

Phone # 773-359-2085 Mobile # 262-497-5165

Email: elite.stony.island@gmail.com

Electrical Contractor:

Address _____

Phone # _____

Website _____

Mobile # _____

License # _____

Email _____

Sign Erector: CHESTERFIELD AWNING CO

Phone # 694 08032

Registration # N71306

Address: 16999 VAN DAM ROAD

Phone # 708 586-4434

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 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): FUTURE REHABILITATION INSTITUTE

ACCIDENT & INJURY CENTER www.rehabinstitute.com 773-357-2085

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? 37' w x 8' h

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

CITY OF CHICAGO SIGN PERMIT APPLICATION CONTINUED

Section 3 continued

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

Length: 36 Feet 0 Inches Height: 5 Feet 0 Inches Depth: 2 Feet 0 Inches

Area: 180 Sq Ft. Weight: 70 lbs

Shape of Sign: Rectangle

Sign Height above Grade:

From Grade to Bottom of sign or sign structure, whichever is lowest 9 Ft.

From Grade to Top of sign or sign structure, whichever is highest 14 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: 32 Feet 11 Inches Height: 4 Feet 11 inches Area: 142 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 #: B3 2

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: 51 (Ft.)

Total Area of new sign: 180 (Sq Ft.) Gross Area of all proposed signs: 180 (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

Section 4 continued

Distance from outer edge of sign or structure to curb line: 62 (Ft.)

Distance from inner edge of sign or sign structure to curb line: 64 (Ft.)

Distance from:

Public Park 10 acres or more: _____ (Ft.)
Public Park 2 acres or more: _____ (Ft.)
Expressway or Toll Road: _____ (Ft.)
Lake Shore Drive: _____ (Ft.)
Michigan Avenue (Oak St. to Roosevelt Rd.): _____ (Ft.)
Residential District: EO _____ (Ft.)
Residential building in a D district: _____ (Ft.)
Existing off-premise/advertising signs on same side of street? ☐ Yes ☐ No
In a B or C District: _____ (Ft.)
In a D or M District: _____ (Ft.)
Waterways: _____ (Ft.)

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 DONE KNOW / NEW TOWNSHIP

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 grounds to revoke or rescind a permit.

Owner of Real Property: _____ Date: _____

Lessee of Real Property: [Signature] Date: 3/13/18

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

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

PROPOSED CANOPY FOR:

Elite Rehabilitation Institute

8550 S. Stony Island Ave.

Chicago, IL 60617

STATEMENT OF NON-COMPLIANCE



The undersigned hereby certifies that the proposed canopy structure is not in compliance with the Chicago Energy Conservation Code, Chapter 12-00, and all other required codes.

The undersigned hereby certifies that the proposed canopy structure is not in compliance with the Chicago Energy Conservation Code, Chapter 12-00, and all other required codes.

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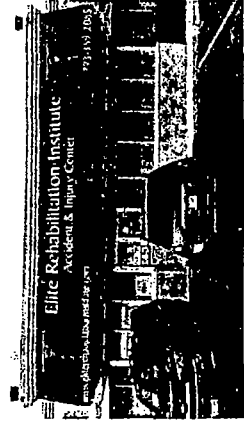
CANOPY CONTRACTOR



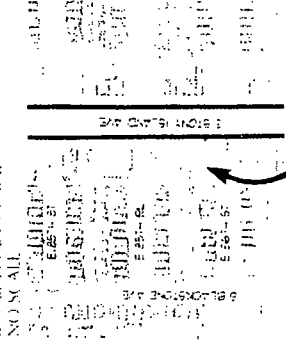
GENERAL NOTES

1. ALL FABRIC CANOPIES TO MEET MINIMUM CODE OF CHICAGO CHAPTER 12-00 CHAPTER 12-00 PART 12-00-00 AND 12-00-00 AND ALL OTHER REQUIRED CODES.
2. CONTRACTOR TO COORDINATE WITH ALL OTHER TRADES.
3. ECTION OF CANOPY TO BE A MINIMUM OF 1' ABOVE EXISTING RAISED CURB AND 1' ABOVE PART OF ADJACENT BUILDING.
4. CANOPY SHALL BE DESIGNED TO RESIST 100 MPH WINDS.
5. BRACING IS REQUIRED TO BE DESIGNED TO RESIST 100 MPH WINDS.
6. DESIGN VALUE: TENSILE STRENGTH: 100,000 PSI.
7. NO LOAD VALUE: 100 PSI.
8. CANOPY TO BE A MINIMUM OF 10' HIGH.

**PROPOSED CANOPY STRUCTURE
INSTALLATION - NO SCALE**



LOCATION MAP



**ARCHITECT OF RECORD
CERTIFICATION**

I hereby certify that the proposed canopy structure is in compliance with the Chicago Energy Conservation Code, Chapter 12-00, and all other required codes.

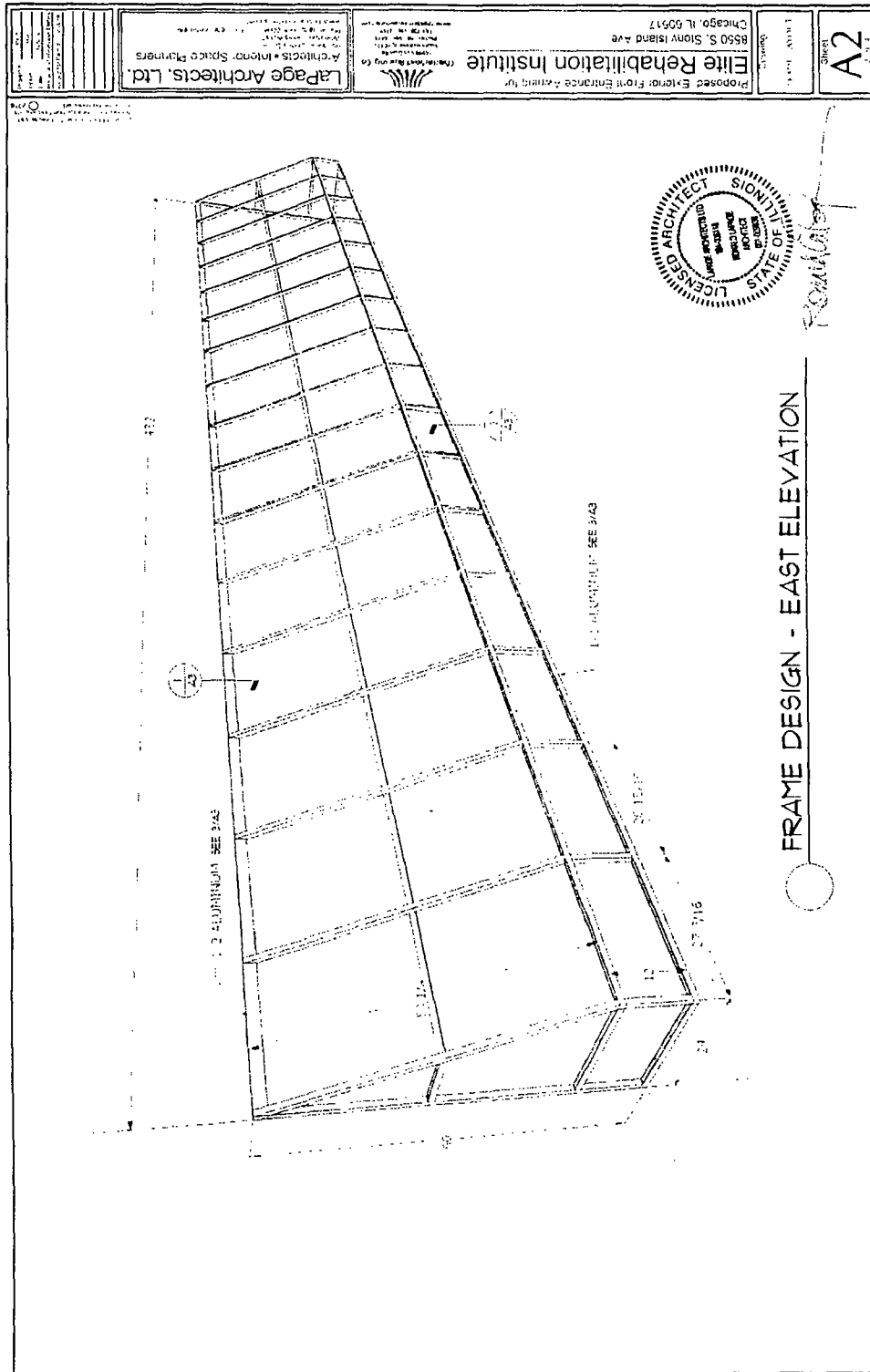


DATE: JUN 16, 2018

A1

Elite Rehabilitation Institute
8550 S. Stony Island Ave.
Chicago, IL 60617

LaPage Architects, Ltd.
Architects • Interior Design • Planners



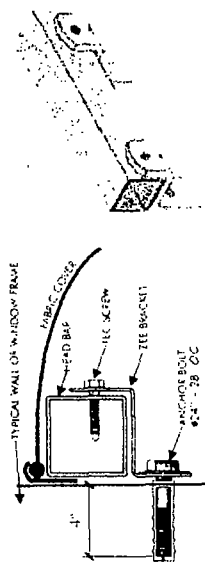
FRAME DESIGN - EAST ELEVATION



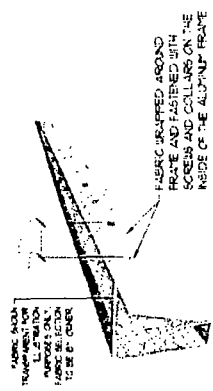
SHEET A2 DATE	PROPOSED ELITE REHABILITATION INSTITUTE 8550 S. Stony Island Ave Chicago, IL 60617	LARAGE ARCHITECTS, LTD. ARCHITECTS • INTERIOR SPACE PLANNERS 1111 N. LAUREL ST. SUITE 200 CHICAGO, IL 60610 TEL: 312.467.1234 FAX: 312.467.1235 WWW.LARAGEARCHITECTS.COM
	PROJECT NO. 12345 DRAWING NO. 12345-01 DATE: 12/15/2023	

[illegible]

2010



1 MOUNTING DETAIL
NO SCALE
SEE MOUNTING INSTRUCTIONS FOR SCALE



2

[illegible][illegible][illegible]

ALUMINUM SPECIFICATION

FASTENER SPECIFICATION

4

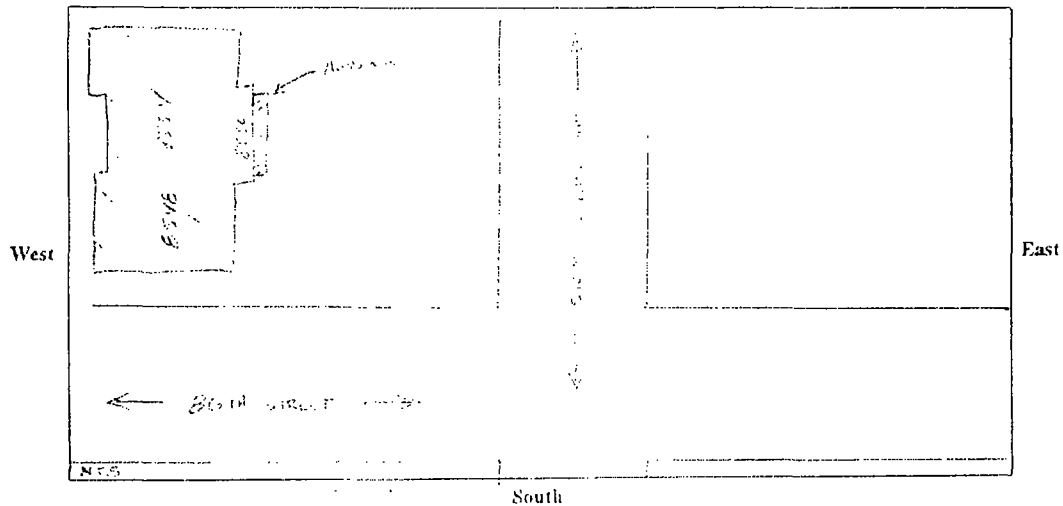
A3

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

Site Address: 8550 S. JAMES STREET 1 of 1 applications

Sign Company: CHICAGO SIGN Rep Name: ALAN

Phone (708) 596-7134 EXT 2000 (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 # ☒

DONT KNOW OLD SIGN

TOTAL SQUARE FOOTAGE:

Square footage of this proposed sign 180

Gross area of all proposed signs 180

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:

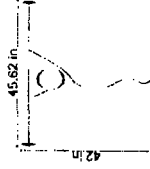
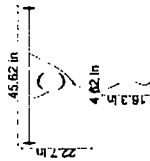
Non-Illuminated ☒
Illuminated ☐
Changing Image ☐
Video Display ☐
Flashing ☐

DISTANCE FROM:

Curb Line. 6.2
Expressway, Toll Roads
or Major Route
(n/a if over 1000 ft) _____
Park (over 10 acres) _____
Residential Zone 80
Existing Off-premise on
same side of street: _____

Signature: [Signature]

Date: _____

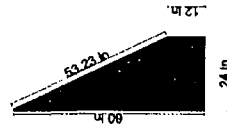


Elite Rehabilitation Institute
Accident & Injury Center

www.eliterehabinstitute.com

773-359-2085

SIDE VIEW



FRONT VIEW

432 in

Elite Rehabilitation Institute
Accident & Injury Center

www.eliterehabinstitute.com

773-359-2085

SAMPLE AWNING FRAME LAYOUT

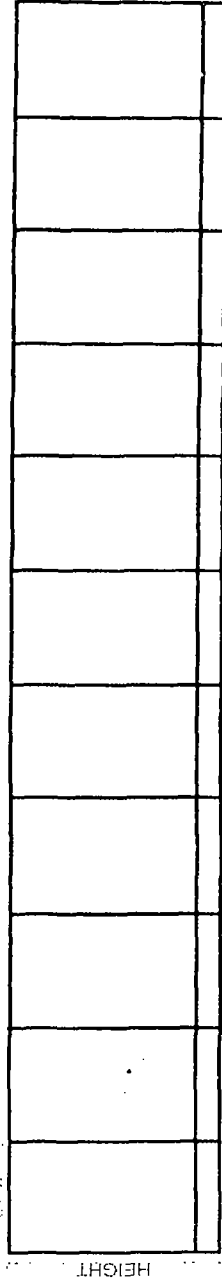
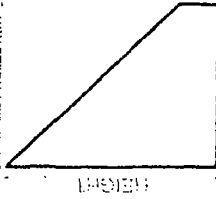
FRONT VIEW

OVERALL AWWNING WIDTH

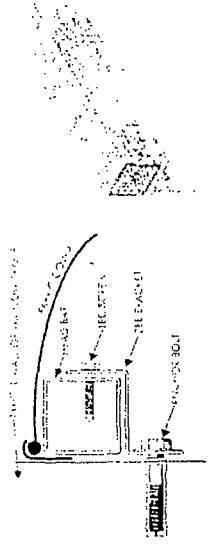
AWNING FRAME RATIO: 1:1 (AWNING WIDTH EQUALS HEIGHT)
 ALL METAL FRAMING MADE OF 1 x 1 SQUARE ALUMINUM
 FOR STRUCTURAL INTEGRITY

SIDE VIEW

AWNING PROJECTION



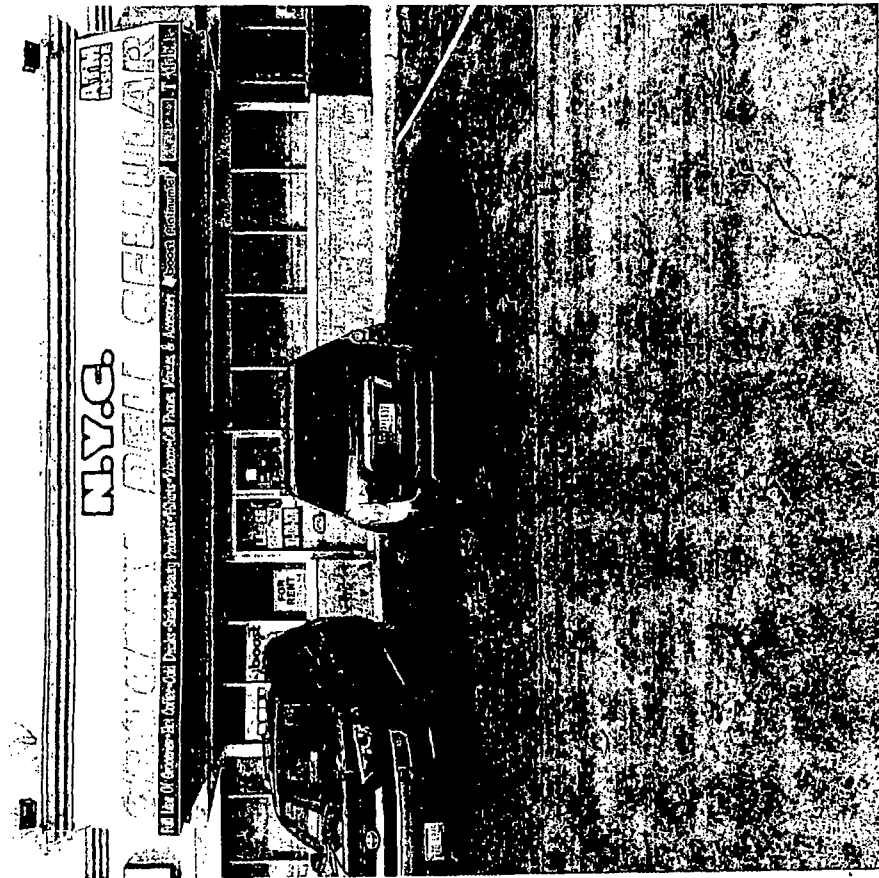
ALL METAL FRAMING MADE OF 1 x 1 SQUARE ALUMINUM



AWNING Detail - NIS

Existing Awning From old
TENNANT
FABRIC BEING REPLACED
WITH NEW GRAPHICS FOR
NEW TENNANT

OLD



CONCEPT RENDERING
FOR NEW AWNING FABRIC AND GRAPHICS

PROPOSED

