



**Dear Alderman Scott Waguespack:**

The applicant referenced above has requested the use of the public right-of-way for a turret(s). An ordinance has been prepared by the Department of Business Affairs and Consumer Protection - Business Assistance Center - Public Way Use Unit for presentation to the City Council. Because this request was made for properties located in your ward, as approved by you as per the attached, I respectfully request that you introduce the attached ordinance at the next City Council meeting.

If you have any questions regarding this ordinance, please contact John Mariane, Manager, Business Assistance Center - Public Way Use Unit, at (312) 744-2063.

**Department of Business Affairs and Consumer Protection**

**APPLICATION TO USE THE PUBLIC RIGHT OF WAY**

**APPLICANT INFORAAATION**

LEGAL NAME OF ENTITY: 2624 N. Lincoln, L.L.C.\_  
PERMIT MAILING ADDRESS: 71 S. Wacker Drive, Suite 4600\_  
CITY: Chicago STATE: IL ZIP: 60606 .  
CONTACT PERSON: Ronald D. Wray TITLE: Vice President  
PHONE: 312.873.4864 .FAX: 312.264.0229 E-MAIL:\_  
' ~ rwrays@pritzkerfamilyoffice.com <mailto:rwrays@pritzkerfamilyoffice.com>

**PROPERTY OWNER INFORAAATION**

NAME: 2624 N. Lincoln, L.L.C.  
ADDRESS: 71 S. Wacker Drive, Suite 4600  
CITY: Chicago. STATE: IL ZIP: 60606

**USE OF THE PUBLIC WAY**

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

TYPE\_ HOW MANY? BUILDING ADDRESS\_  
Bay Window jt' 2624 North Lincoln Ave, Chicago IL. 60614 -p/iUL\*r\_\_ ^\_\_

- 2. Please enclose one sketch of proposed use of the public way, which maps to scale the proposed use and its relationship to surrounding right-of-way. All measurements must be indicated.
- 3. All "No Fee" items require a \$50 application fee. Please remit with application.
- 4. "No Fee" items are listed in the price list on page 4.
- 5. 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: \_TITLE:\_  
F.E.I.N. or SOCIAL SECURITY NUMBER:

**ALDERAAAN'S APPROVAL**

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

CHICAGO  
City of Chicago | Department of Business Affairs and Consumer Protection | Public Way Use Unit business AFMiKsa Business Assistance Center | City Hall, Room 800 | 121 North LaSalle Street | Chicago, Illinois 60602 eoKswwnwnemw  
www.cityofchicago.org/bacp <http://www.cityofchicago.org/bacp> | 312.74.G0BIZ (744.6249) | 312.742.1974 (TTY)