



Office of the City Clerk

City Hall
121 N. LaSalle St.
Room 107
Chicago, IL 60602
www.chicityclerk.com

Legislation Details (With Text)

File #: O2011-2540
Type: Ordinance **Status:** Passed
File created: 4/13/2011 **In control:** City Council
Final action: 5/4/2011
Title: Grant(s) of privilege in public way for CVS Pharmacy No. 5987 - sign
Sponsors: Schulter, Eugene
Indexes: Grants of Privilege
Attachments:

Date	Ver.	Action By	Action	Result
5/4/2011	1	City Council	Passed	Pass
5/2/2011	1	Committee on Transportation and Public Way	Recommended to Pass	Pass
4/13/2011	1	City Council	Referred	

ORDINANCE CVS PHARMACY # 5987 Acct. No. 299710-67 Permit No. 1093446

Be It Ordained by the City Council of the City of Chicago:

SECTION 1. Permission and authority are hereby given and granted to CVS PHARMACY # 5987, upon the terms and subject to the conditions of this ordinance to maintain and use two (2) sign(s) projecting over the public right-of-way attached to its premises known as 4800 N. Damen Ave..

Said sign structure(s) measures as follows; along N. Damen:

One (1) at three (3) feet in length, two point eight three (2.83) feet in height and twelve (12) feet above grade level.

Said sign structure(s) measures as follows; along W. Lawrence:

One (1) at three (3) feet in length, two point eight three (2.83) feet in height and twelve (12) feet above grade level.

The location of said privilege shall be as shown on prints kept on file with the Department of Business Affairs and Consumer Protection and the Office of the City Clerk.

Said privilege shall be constructed in accordance with plans and specifications approved by the Department of Transportation (Division of Project Development) and Zoning Department - Signs.

This grant of privilege in the public way shall be subject to the provisions of Section 10-28-015 and all other required provisions of the Municipal Code of Chicago.

The grantee shall pay to the City of Chicago as compensation for the privilege #1093446 herein granted the sum of one hundred seventy-five (\$175.00) per annum in advance.

A 25% penalty will be added for payments received after due date.

The permit holder agrees to hold the City of Chicago harmless for any damage, relocation or replacement costs associated with damage, relocation or removal of private property caused by the City performing work in the public way.

Authority herein given and granted for a period of five (5) years from and after Date of Passage.

Gene Schuler 47^{xn} Ward

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Existing Signage - Elevation
Existing Sign #1
48" Letterset w/ 48- Box Sign Illuminated

S/FB D/FD Yes No
Existing Sign #2
None Existing Illuminated
S/FD D/FO Yes No
.Proposed Signage.

Proposed Signage - Elevation
No! To ScalB Unless Holed |-

LEAVE EXISTING AS IS NO CHANGES

i2-r (C)L

[CVS]

ptiaimacy
[T] | EXISTING 00" ILIUM. LETTERSET |
1 2 | [TEARDROP BLADE SIGN

CVS

pharmacy*

RECOMMENDATIONS

ADDRESS: 4800 N. Damen Ave. CITY/STATE: Chicago. IL ZIP: 60640
PROJECT #: 751
LOCATION #: S887
SUBMITTALS: APPROVED APPROVED AS NOTED REVISED AND RESUBMIT
CHIT CONTRACTOR
file path: ...cycvs pharmacyVUrban IniUativaV_5987_Chicago_IL.cdr
DATE: 07/00/10 SCALE: ; K.T.S. 1
Rev. 1: 00/00/00
Rev. 2: 00/00/00
Rev. 3: 00/00/00
Rev. 4: 00/00/00
Rev. 5: 00/00/00

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APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICANT INFORMATION LEGAL NAME OF ENTITY: Highland Park CVS, L.L.C. h&4 (ll/S) phirm^r/kj & S'QS 1
PERMIT MAILING ADDRESS : 1

CITY W66*/j6CIC&r STATE ZIP CODE; g<<?g<f S

CONTACT PERSON: t>ffW*£ O'JfV^V TITLE Q>6rDtrSWA^ PHONE: HDI-nO'\$2>>5 FAX: HM'frSJ^tIO EMAIL: 0
£&WD_QKg.

Please submit al) of your application materials via mail -to the following address. No faxes will be accepted.
City of Chicago Department of Business Affairs and Consumer Protection Public Way Use Unit Customer Service Center 333 S. State Street, Suite LL30 Chicago, IL 60604-3977

USE OF THE PUBLIC WAY

(312)74-GOBIZ (744-S249)

(3j2)7<<-i974fTTY) 1. List the proposed or existing use below and complete the attached worksheet. Only use one application per public way use type.

Type How many? Building Address

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.

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, and true to the best of knowledge and belief.

By: H(L^ d lSlu.46,x<C_Title: ^jy flo^e 0MHjtCnUtk^

F.E.I.N. or Social Security Number: ALDERMAN'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 is located.

d*4L^K*D HI DATE /€> // 4

ALDERMAN'S SIGNATURE