



Office of the City Clerk

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

Legislation Details (With Text)

File #: Or2014-415
Type: Order **Status:** Passed
File created: 9/10/2014 **In control:** City Council
Final action: 10/8/2014
Title: Issuance of permits for sign(s)/signboard(s) at 5460 S Archer Ave - 108 sq. ft.
Sponsors: Burke, Edward M.
Indexes: SIGNS/SIGNBOARDS
Attachments: 1. Or2014-415.pdf

Date	Ver.	Action By	Action	Result
10/8/2014	1	City Council	Passed	Pass
9/30/2014	1	Committee on Zoning, Landmarks and Building Standards	Recommended to Pass	Pass
9/10/2014	1	City Council	Referred	

Committee on Zoning, Landmarks, and Building Standards

(Sign*)

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

(Contractor's name and address)

Olympic Signs

1130N.GarfiBlvd

Lombard. IL 60148

for the erection of a sign/signboard over 24 feet in height and/or over 100 square feet (in area of one face)

at: (Business Name & Address)

Primary Fyrt Care

Permit #100548837

5460 S. Archer Ave.

Chicago. IL 60638

Dimensions: Length 50'

Height 2'-2"

Height above grade/roof to top of sign 11'

TOTAL SQUARE FOOT AREA:

[0£

Alderman Burke - Ward 14

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, signboards and structures.

Sign Permit Application

APPLICATION NUMBER

100548892

DRAWINGS ATTACHED [-]

TYPE OF sign FLAT OR BOX

ADDRESS OF SIGN

5460 S ARCHER AVE, 60638-

FT

50
IN

0

sq. FT

108
LBS

700

type of permit NEW CONSTRUCTION (SIGN)

payer of annual inspection PRIMARY EYE CARE,.

5460 S ARCHER AVE CHICAGO, IL 60638

(773)735-6090

SIGN MANUFACTURER

OLYMPIC SIGNS

TOTAL WATTAGE 780

ADDRESS WHERE SIGN CAN BE SEEN PRIOR TO ERECTION

type of lamp FLUORESCENT

NO. OF BALLAST TRANSFORMERS

3

INPUT OF TRANSFORMERS 120

TYPE OF SUPPORT FOR SIGN BUILDING

SIGN BOARD SUPPORT MEMBERS STEEL

ANNUAL FEE CONSTRUCTION FEE 1017 B FEE TOTAL FEE AMOUNT PAID BALANCE DUE

LOCATION OF SWITCH OUTSIDE SIGN

SIGN LOCATION

WEST ELEVATION: ILLUMINATED SIGN BAND DISPLAY "PARKING FOR PRIMARY EYE CARE ONLY" & "24 HOUR EMERGENCY EYE CARE"

The undersigned certifies that the statements in this application are true and correct. If other signs are to be erected they must be covered by additional permits.

E69270 /

ELECT CONTRACTOR
OLYMPIC SIGNS, INC.
SIGN ERECTOR
OLYMPIC SIGNS INC.

1130 N.GARFIELD LOMBARD, IL 60148
1130 N. GARFIELD LOMBARD IL, 60148

SUPERVISOR SIGNATURE

This 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, Mayor
Department of Buildings Felicia Davis, Commissioner

ES PERM APP WEB RD060211

TYPE OF BUSINESS COMMERCIAL Other: EYE CARE
Name: PRIMARY EYE CARE

SIGN BOND REQUIRED? YES
COUNCIL ORDER REQUIRED YES

IJC #: STATE LICENSE

is special permission required from chief electrical request

Renewal Date:

Projects Over: [N] Private Property [Y] Public Way Grant Permit #: 1113947

Planned Development/Manufacturing PMD/PD#: Zoning District: B3 Other:

TIME STAMP

TYPE OF SIGN: ADVERTISING ILLUMINATE MOVEABLE BUSINESS

TOTAL STREET FRONTAGE OF LOT (IN FEET) 187

TOTAL AREA OF NEW SIGN (SQ.FT.) 108

TOTAL AREA OF ALL SIGNS ON LOT (SQ.FT.) 334

HEIGHT OF SIGN ABOVE GRADE (TO TOP) 12 ft

DISTANCE OF CURB LINE OUTER EDGE (ft) 12 DISTANCE OF STRUCTURE SIGN CLERK APPROVED FOR PERMIT

DISTANCE FROM (ft): A. PUBLIC PARK (OVER 10 AREMARKS

1,000 B. EXPRESSWAY (IF LESS THAN 1,000 FT.)

RESIDENCE DISTRICT (ADVERTISING SIGNS ONLY)

IF REPLACEMENT SIGN OR CHANGE OF FACE, WHAT DOES THE EXISTING SIGN READ? Original Payee:

Landmark Hold: Status:

ZONING (OFFICE USE ONLY) 1 ! :

ES_PERM_APP_WEB RD060211

PUBLIC WAY USE UNIT: PERMIT INFORMATICS »»..

J3/2014 - Stan Adams

3A Name ^cation ZipCode Account Num ber Site Number Area

Permit Type Permit Number

PRIMARY EYE CARE ASSOCIATES

5460 S. ARCHER AVE.

60638

264190

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PERMIT

SIGN

1113947

Next steps: Department of Buildings - Permit process for signs

Your Public Way Use permit number is shown above. This number is to be used for each item on and is needed for the Buildings (DOB) online sign application located @ www.cityofchicago.org/buildings. AH %ns, ^ canopies, banners, marquees and awnings require a buildings permit Only a licensed sign erector may apply for the Buildings permit onjine. The Buildings per^

For additional information please contact the Buildings Department at (312) 744-3400. '

Please return the completed Public Way Use. application to City Hall -121 N. LaSalle Street, Chicago, IL 60602 Room 800.

The completed application package must include a copy of the completed DOB application and the Public Way Use '

application. The Public Way Use application must contain the Alderman's signature, site plans on 8 1/2 X M paper, photos

ofthe «tem(s), the signed Acceptance letter and a copy of the insurance certificate; For additional information please

contactBACPat(312>-74-COBIZ (312-744-6249).

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