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APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICANT INFORMATION: NAME: Northwestern Memorial Hospital

ACCT#: 69273 RENEWAL SITE#: 3

PERMIT*: 1051838

ADDRESS: 541 N. Fairbanks Ct., Floor 14, Apt./Suite 1404

ZIPCODE: 60611 CONTACT PERSON: David Stout

TITLE: PHONE: (312)926-1195

1 I Check box for change of mailing address. Provide information below

New Mailing Address:_____

Phone:

Contact:

Note: Any changes to ownership requires a new application.

If no changes, complete applicant certification, obtain Alderman's signature, include photo(s) and sketch as described below. Return to:

City of Chicago

Department of Business Affairs and Consumer Protection Business Assistance Center - Public Way Use Unit City Hall -121 N.

LaSalle Street, Room 800 Chicago, IL 60602 (312)-74-GOBIZ (312-744-6249)

USE OF THE PUBLIC WAY

Type How Many? Building Address

Bicycle Rack 10 245 E. CHICAGO AVE

ALDERMAN'S SIGNATURE:

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