



Edward M. Burke 14<sup>th</sup> Ward  
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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) • (312) 744-1944 (TTY) <<http://www.cityofchicago.org/bacp>>

**04/13/2011**

Alderman Edward M. Burke N

**Ward # 14**

City of Chicago

**City Hall, Room 302**

121 North LaSalle Street

Chicago, Illinois 60602

**Re: An ordinance to use and maintain a portion of the public right-of-way for one (1) sign(s) for JM AUTOBODY REPAIR #2, adjacent to the premises known as 4417 S. Kedzie Ave..**

**Dear Alderman Edward M. Burke:**

The applicant referenced above has requested the use of the public right-of-way for a sign(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.

Very truly yours,

**Norma I. Reyes Commissioner**  
**Department of Business Affairs and Consumer Protection**  
**NIR/sl**

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

City of Chicago Department of Business Affairs and Consumer Protection Public Way Use Unit 333 S. State Street, Suite 310 Chicago, IL 60604-3975; Stan Aitms (312)747-9035  
or  
Lisa Punieri (312)747-7014  
tax  
13J2)74S-2m

**APPLICANT INFORMATION**

LEGAL NAME OF ENTITY:

PERMIT MAILING ADDRESS CITY

**y OJVoafIjo**

CONTACT PERSON:

**TC M- ken ^U^py „UMfl .ft.Ave.**

STATE

ZIP CODE: (jffo^C^

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CONTACT

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USE OF THE PUBLIC WAY

J. List the proposed or existing use below and complete the attached worksheet. Only list one application per public way use type, ■-i

\_\_Tvpt\_\_ How many? \_\_ Building Address

\* **MMIY^Kaiafc Ave---**

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.

B.v. \_\_\_\_\_

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.

ALDERMAN'S SIGNATURE

WARD

DATE

*ra*