

Dear Alderman Thomas Tunney:

The applicant referenced above has requested the use of the public right-of-way for a sample basin(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 INFORMATION:

NAME: Advocate Illinois Masonic Medical Center

ACCT#: 63145 RENEWAL SITE#: 2

PERMIT#: 1054217

ADDRESS: 836 W. Wellington Ave.

ZIP CODE: 60657

CONTACT PERSON: Thomas J. Baumstark

TITLE: PHONE: (773)296-8090

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

Sample Basin

836 W. WELLINGTON AVE.

J,

ALDERMAN'S SIGNATURE

WARD:7 / DATE

DDQM17