

ANNA

SALON / SPA

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-55.6 lrv-

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>>

06/08/2011

Alderman Mary O'Connor Ward # 41 City of Chicago City Hall, Room 203 121 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 XANNA SALON & SPA, adjacent to the premises known as 6650 N. Northwest Hwy..

Dear Alderman Mary O'Connor:

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.

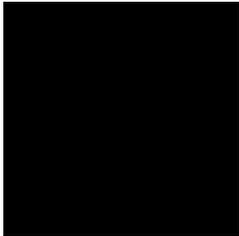
If you have any questions regarding this ordinance, please contact John Mariane, Manager, Business Assistance Center - Public Way Use Unit, at (312) 744-2063.

Department of Business Affairs and Consumer Protection

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CITY OF CHICAGO • BACP-PWU • BUNDLE PERMIT APPLICATION • V.M.28.10

APPLICATION TO USE THE PUBLIC RIGHT OF WAY



•• DOB PERMI

AMNESTY ELISIDYES DNO

APPLICANT INFORMATION

LEGAL NAME OF ENTITY: /flnrMX SS\|O\

PERMIT MAILING ADDRESS: (rtU<5>P> ^ Nrf^jfesV V\|

CTY: QrliCCQO , "Y STATE: T,l-

CONTACT----- - - -

ZIP CODE: [cft^]

,1 PERSON: V&ftliffittVA TITLE: p^^iiffIV

(XMT)3tn->n05 FAX: 'm|A U E-MAIL: SCQ^lf^^V^^Q»t0d

PHONE:

BUILDING OWNER INFORMATION

NAME: LT^ \S A . /> B>q'»liP_

cCX « „ STATE: ,27^- ^

ADDRESS:

CITY

ZIP CODE: 60 63 /

PHONE: 77S - ^VVfAX:

E-MAIL:

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USE OF THE PUBLIC WAY

1. List the proposed or existing use below and complete the worksheet on page 3. Use only one application for all public way use type.

TYPE

HOW MANY? BUILDING ADDRESS

2. Please enclose one sketch of each proposed use of the public way, which maps to scale the proposed use(s) 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, are true to the best of my knowledge and belief.

BY:

TITLE:

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 is located.

ALDERMAN'S SIGNATURE DATE:

3 SIGNATURE:

WARD: V/c"

CHICAGO.

| Department of Business Affairs and Consumer Protection • Business Assistance Center

ad Public Way Use Unit ■ City Hall, Room 800 • 121 North LaSalle Street, Chicago, Illinois 60602
S^& www.cityofchicago.org/city/en/depts/bacp <<http://www.cityofchicago.org/city/en/depts/bacp>> • 312.74.G0BIZ (7+4.6249) •
312.742.1974 (TTY)