



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

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

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

**APPLICANT INFORMATION: NAME: Illinois Institute Of Technology**

**ACCT#: 63395 RENEWAL SITE#: 9**

**PERMIT\*: 1050617**

**ADDRESS: 5201 S. State St., Apt/Suite 203**

**zipcode: mm**

**CONTACT PERSON: Management<sup>1</sup>**

**TITLE: PHONE: 312 511 3034**

**Jy<sup>i</sup> Check box for change of mailing address. Provide information below**

**New Mailing Address: \o 3ST/fS" T ^ SUITE \100-SvJ <file:///100-SvJ>\_**

**Phone: 31 2 511 3034 '**

**Contact: fA A-ftV ft/Mg" SMITH\_**

**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**

**Conduit**

**60W.33RDCT7- 100 Ia)- 33 HP ST.**

**ALDERMAN'S SIGNATURE:**

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