

Legislation Details (With Text)

File #:	O20	14-3321			
Туре:	Ordi	nance	Status:	Passed	
File created:	4/30	/2014	In control:	City Council	
			Final action:	5/28/2014	
Title:	Exemption from physical barrier requirement for commercial driveway alley access for Drive Out Auto Incorporated				
Sponsors:	Thompson, JoAnn				
Indexes:	Ingress/Egress				
Attachments:	1. O2014-3321.pdf				
Date	Ver.	Action By	Acti	on	Result
5/28/2014	1	City Council	Pas	sed	Pass
5/22/2014	1	Committee on Transporta Public Way	tion and Red	commended to Pass	Pass
4/30/2014	1	City Council		erred	

BE IT ORDAINED BY THE CITY COUNCIL OF CHICAGO:

SECTION 1. Section 10-20-430 of the Municipal Code of Chicago, the Commissioner

of Transportation is hereby authorized and directed to exempt Drive Out I

Auto, Incorporated of 5601-5623 South Western Avenue from the provisions requiring barriers

as a prerequisite to prohibit alley ingress and egress to parking facilities for Premise Address.

SECTION 2. This ordinance shall take effect and be in force from and after its passage and publication.

JoANN THOMPSO Alderman, 16th Ward

04/15/2014 TUE 16:39 FAX

City of Chicago Rahm Emanuel Mayor

Application for Business License and Tax Registration

Acct# 389078 SIte#1 Appl# 2450648 APP/ISSUE

City of Chicago - Department of Business Affairs and Consumer Protection Business Assistance Center City Hall, Room 800 121 North LaSalle Street Chicago, IL 60602 (312)-74-GOBIZ (312-744-6249) (312) 744-1944 (TTY) businessIlcense@cityofchicago.org <mailto:businessIlcense@cityofchicago.org>

ACCOUNT INFORMATION

Account Number Site Number Legal Name Legal Entity Type Business Start Date FEIN

IBT Number SSN If Applying as Trust, Trust Number Incorporation State

Incorporation Date If Exempt, Illinois Exemption Number Illinois Exemption Expiration Date

If you are claiming exemption status you must attach a copy of your Illinois Exemption Certificate or insurance Certificate.

04/15/2014 TUB 16! 39 FAX

BUSINESS LOCATION INFORMATION

le this site also your headquarters (Y/N)? Y

DBA (Doing Business As) DRIVE OUT AUTO INC Site Start Date

03/21/2014 Business Activity

20500 SQ FT-1ST FL-2 EMPLOYEES-OUTDOOR USED CAR SALES

Page 1 of 9

Property Identification Number (PIN)

Business Activity

RETAIL SALES / NONFOOD Sales / Rental / Lease of New or Used Vehicles (Land. Water or Air)

Business ContactMAHMMOUD J. ALI

Mlddlo

Email Address Address

5601-5623 S. WESTERN AVE.

.606.36.._

Hours of Operation

Sunday <u>Monday</u> Tuesday Wednesday <u>Thursday</u> <u>Friday</u> Saturday

NEW LICENSE INFORMATION Application Publication Fee Fee

The following licenses ere required to operate the business listed above. The following are application fees

Code License Description

Location Description

1010 Limited Business License

INSPECTIONS REQUIRED

Zoning Department 04/15/2014 TUE 16:39 FAX

OWNER/OFFICER INFORMATION - FOR PERSONS NOT LEGAL ENTITIES

MAHMMOUD FISt PRESIDENT

Name Title

Date of Birth **/**/*•«

Residential Phone Number (708)369-2708 Email Address

ALI Sal

Ownership 100

SSN Fax Number

Residential Address 1B068 OWEN DR. air*atN&/atraalNama ORLAND PARK "CTIi?

60467-"»p

H IMIIIMIf IliMmitIJHII

Name Title

Date of Birth

Residential Phone Number Email Address

Coil

Ownership SSN

Fax Number

Residential Address

Strniri no. Olrwt Nanw

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Attach a separate sheet with (he above Information for any additional Owners / Officers or Legal Entitles

OWNERSHIP INFORMATION ■ FOR LEGAL ENTITIES

(i^fponIton. Noi.KoM^oSt Club, Paring rati Ip, unread PHrtnaraMp of LImrfarJ LIIbdrty Company)

IBT

Incorporation Date

Fax Number Ownership

- Su lH "%

SIrtot No. /SIraat Nama

Attach a separate sheet with the above Information for any additional Owners / Officers or Legal Entitles

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04/15/2014 TUB 16; 39 FAX

Page 3 of 9

BUILDING OWNER / LESSOR INFORMATION (IF SITE NOT OWNED BY APPLICANT)

Lessor Name Lease Start Date

Is title to the property held In trust (Y/N)? If In trust, Trust Beneficiary Name Contact Name Phone Number

Address

SbWNaJSIrantNn

Lease End Date If In trust, Trust Number

Fax Number

-Hp"

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BUSINESS LOCATION MANAGER INFORMATION

Manager Name

Date oF Birth Phone Number Effective Date Address

Cml

SSN

Pax Number Email Address

"STair

Paga 4 Of 9 04/15/2014 TUB 16i40 FAX

License Type: 1010 Limited Business License

I acknowledge that the applicant, or any person who holds 25 percent or more percentage Interest In this business license application, Is not delinquent do any court ordered child support arrearage, or has failed (o comply with a child support withholding nodes.

What Is the total number of employees In your establishment?

Are you licensed by the Illinois Department of Professional Regulation? If so, please Indicate the occupation/profession listed on your state certificate, and provide a copy of the certificate.

Will you operate the business In a building or a completely enclosed cincture?

QUESTIONS AND ANSWERS TO DETERMINE APPLICABLE PERMITS

Will you Install, operate and maintain a SIDEWALK CAFE?

Will you Install, operate and maintain a CANOPY outside your property line?

Will you Install, operate and maintain a BALCONY outside your property line?

Will you Install, operate and maintain a public way Infringement other than the above (PRIVILEGE) outside your property line?

Page 5 of 9

04/15/2014

QUESTIONS AND ANSWERS TO DETERMINE APPLICABLE TA	XES Tex Typo : 84	02 Use Tax for NonTitled Pers	ional Property
Will or do you, or your business, purchase \$2,600.00 or mora per year	ar of nontitled tangible	i-i y i-i _N	
personal property for use In (he C Ily of Chicago from any retell vend No	or/retailer located		
Image: Chicago? Nontitled tangible personal property Includes, bull equipment, supplies, office supplies, furniture, building materials, etc. go to #5.1 Are you a contractor? (If yes, step; If no, go to #3.) Image: VII Image: Chicago Area of the supplication of the s		1_1 1_1	
Are you a business? {If yes, stop; of no, go to #4.) I-i $_{\rm Ye}$ s I- No \Box V11 \Box			
Are you an Individual? {If yes, stop; If no, stop} -i v_{Bg} i- $_{NP}$			
5 Are you a retailer located outside the City of C 1% tax from customers who will use the perso CltyofChlceoo? ¹ - ¹			i-i _№
QUESTIONS AND ANSWERS TO DETERMINE APPLICABLE TAT \mathbf{y}	KES Tax Type: 754	0 Employer's Expense Tax	
Deven employ caleby emissible relieves of the second of the second secon	# 0\:: ::		

Do you employ solely agricultural laborers? {If yes, stop; If no, go to # 2) i-i y Q_a i-i N_o Do you employ solely domestic servants on a dally basis working In private homes? {If yes, i-i y i-i N

File #: O	2014-3321, Version: 1
stop; If no,	go to #3.)
	No Do you or have you employed 60 or more employees who each earn \$900,00 m a given i-i " i-i quarter and spend at least 30% or more of theIrAWorMIme-In Chicago? When-answering this- I -I question, you must consider the total number of employees at all your business sites, not 1-' 1-1 lust (his site. "
QUESTIC No	NS AND ANSWERS TO DETERMINE APPLICABLE TAXES Tax Type: 7390 Personal Property Lease Transaction Tax
Do you lea No	se any personal property to customers for use In the city? i-i _{Yeg} j-i
	o #2; If no, go to question 3.)
leases and	nse any personal property to customers for'use In the clly. Including software i-i yes r-i nonpossessory computer leasee? II II II o W; If no, goto #3.}
	se as a lessee any personal property from a lessor to be used within Chicago or lo r~i y i- j^o
re-lease to No	another customer? (If yes, go to #4; If no, stop.) I I J
Do you lea	se personal property from a vendor for the purpose of re-teasing said personal i-i $_{ m Y}$ i-l TT"
property to	your customers? {If yes, stop; If no, go to #5.)
	ndors charge you trie Transaction Tax on lease of personal property to be used In i-i _Y i-i u must verify (hat the tax Is charged on each of your leases. {If yes, stop; If no, II II 1_1 1_1
Do you aa	a lessor or lessee, solely lease rolling stock used by an Interstate carrier moving i-i y $_{9g}$ i-i $_{No}$
In Interstate	e commerce? {If yes, stop; If no, go to #7.}
	7 Do you solely rant or lease medical equipment lo patients which correct or replace body i-i _Y i-i _N parts? {I yee. stop; If no. go to #8.)
-8	Do you solely rent or lease ground transportation vahlelo(s) and wfth respect to that vehicle i–i ^71 i-i I7~" you or your leasee (If you are the lessor) are subject (o the City of Chicago Ground Transportation Tax? (If yes, stop; rf no, go lo #9.}
~9	Do you solely engage Tn the non-possessory lease(s) of a computer to effectuate the i-i , p^i Tj^~ execullon, clearing, processing, matching or recording of a trade on a board of trade? {If II II yes, stop; If no, go to #10.)
"10	Do you solely engage In the non-poss«ssory leas«(s) of a computer to effectuate the deposit, i-t y r-i j^ - withdrawal, transfer or loan of money or securities? {If yes, stop; If no, go to #11.}
11	Do you solely leese or rant motion picture film(s) used by the owner, manager or operator of r-i $_{Ye9}$ i-i a place of amusement that exhibits the film fo patrons who are subject to the City of Chicago's Amusement Tax? '- ^{1 L} - ¹

04/15/2014	TUB 16i40 PAX

Page 6 of 9

Tax Type: 6402 Use Tax for Nonfilled Personal Property

1 What ra the date of your first taxable transaction for this tax?

Tax Type 7540 Employer's Expense Tax

1 What Is the data of your first taxable transaction for this tax?

- Tax Type: 7S50 Personal Property Lease Transaction Tax
 - 1 What Is the date of your first taxable transaction for this tax?

Page 7 of 0

City of Chicago Public Way Use Acknowledgement

On

File #: 02014-3321, Version: 1

Legal Name of Business

(Expected) Business Start Date

began or intends to begin operations of a

Business Description/Type of Business at 5601-5623 S.

affirmatively state and attest that:

WESTERN AVE., CHICAGO, IL 60636

Business Location Street Address, City, Stale and Zip Code

By filing this Affidavit I,.

Business Owner Name

have been advised about and I fully understand my public way use requirements and

There are NO public way use(s) above, on, or below the public way at this present

time. However, if I plan to install or use any public way uses above, on, or below the

public way in the future, I will apply for the required permit(s) prior to said Installation(s) or

ijse^roTthe'pub1te"way:

There are public way use(s) above, on, or below the public way and I will apply for the required permit(s) immediately. In addition, rf I plan to Install or use any other public way use(s) above, on or below the public way in the future, I will apply for the required permit(s) prior to said installation[^]) or use of the public way. The currently existing public way use(s) Include:

- Sidewalk Cafe
- Balcony

G Canopy/Awning D Sign

Light

□ Other.

ACKNOWLEDGEMENT

I certify that the information supplied In this document Is true and complete, and hereby authorize the City of Chicago to make all necessary inquiries to verify its accuracy. Any false statement will subject the license applicant to potential penalties under the Cily of Chicago False Statement Ordinance per Section 1-21-010.

Print Business Owner Name

Phone Number

Signature of Business Owner

Preparer's Signature

Preparer's Address (Street, City, and Zip Code are required.)

Department of Business Affairs and Consumer Protection Small Business Center - Public Way Use Unit City Hall»121 N. LaSalle Street, Room 800 Chicago, IL 60602

04/15/2014

SIGNATURE REQUIREMENTS

To Ins best of my knowledge, the business Identified In this application Is subject to only those licenses, permits, and taxes noted on this application. I understand that upon any change to the business activity, I em obligated to notify the Chicago Department of Business Affairs and Consumer Protection by filing a new application.

I certify that any structural, plumbing, ventilation or electrical changes made fo the premises Identified In this application, were done pursuant to a valid building permit.

I undersland that per Section 4-4-175 of Ihe Chicago Municipal Code, all license holdert, other than city liquor license holders, shall notify the Department of Business Affaire end Consumer Protection within 60 days of the effective date of any change that occurs In the officers, substantial owners, members or eny other Individual required to be Identified In the Initial license application, by filing the appropriate application. Per Section 4-60-060. liquor license holders shall noWy the Department of Business Affairs and Consumer Protection within 30 days of the effective date of any such chenge.

I understand that per Section 4-4-60 of the Chicago Municipal Code, no license, other than liquor, public place or amusement or performing arts venue, shall be approved and the license application fee shall be forfeited If the application review process le not completed within 90 days after the license application Is filed, except where the delay In completing the process has been occasioned by the city. A new application and filing fee must be submitted to the Department of Business Affairs and Consumer Protection after the expiration of the 00-day period.

I understand that par Section 1-21-010, any person who knowingly makes a false statement of material fact to the Clly In violation of any statute, ordinance or regulation, or who knowingly falsifies any statement of material fact made In connection with an application, report, affidavit, oath or attestation, including a statement of material fact made In connection with a bid, proposal, contract or economic disclosure statement or affidavit. Is liable to lhe Clly for a civil penalty or not less ihan \$600.00 and not more than \$1,000.00 plus up to three times the amount of damages which the City sustains because of the person's litigation end collection coats end attorney's fees.

I understand thai until a license application Is filed and approved and a business license certificate Is Issued, I may not operate the business. I understand that this license application will nol be considered filed untn all application requtremente have been mot and all required fees have been paid. I undersland that operating a business without a license may subject the license applicant to penalties provided In Chapter 4-4, 4-SO and 4-156 of the Chicago Municipal Code including the Imposition of a fine up to \$10, 000 and closure of the premises.

LICENSE REFUND POLICY

I understand that the Department of Business Affairs and Consumer Protection will Issue a rebate or refund of a license fee, In total or In part, only under one of the following conditions:

Authorized Signature Date

- 1. The license fee was collected through an error.
- 2. The licensee has been prevented from enjoying the license privilege due to Induction Into the armed services of the United Slates and has been stationed beyond the city.
- 3. The licensed business Is forced to close before the expiration of the license period by reason of the taking over of the licensed premises by the United StateeJSovemmenI.

Printed Name Title

The person who assisted In the preparation of this document muet complete the section below:

Preparer's Name

Preparer's Signature Date

Preparer's Address (Street, City, and Zip Code are required.)

'

Preparer's Phone Number

Page 9 of 9

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