



Office of the City Clerk

City Hall
121 N. LaSalle St.
Room 107
Chicago, IL 60602
www.chicityclerk.com

Legislation Text

File #: Or2013-74, Version: 1

Committee on Zoning, Landmarks, and Building Standards

(Signs)

ORDERED, That the Commissioner of Buildings is hereby directed to issue a sign permit to:

(Contractor's name and address)

**First Ad Comm
3744 West Lawrence Avenue
Chicago, Illinois 60625**

for the erection of a sign/signboard over 24 feet in height and/or over 100 square feet (in area of one face) at: (Business Name & Address)

**Sun Beauty Supply
1634 East 87th Street
Chicago, Illinois 60617**

**Dimensions: Length 27 feet Height 10 feet
Height above grade/roof to top of sign 10 feet**

TOTAL SQUARE FOOT AREA: 270 feet

Such sign(s) shall comply with all applicable provisions of TITLE 17 of the Chicago Zoning Ordinance and all other applicable provisions of the Municipal Code of the City of Chicago governing the construction and maintenance of outdoor signs, signboards and structures.

MICHELLE A. HARRIS
Alderman, 8th Ward

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICATION WORKSHEET

a For use by NEW APPLICANTS ONLY.

a For renewals obtain form from City Hall, 121 N. LaSalle St., Rm. 800 or call (312) 74 - GOBIZ (744-6249)

Complete the worksheet for each use of the public way and indicate all applicable measurements.

Exact Street (i.e. S. State St.)	Quantity	Length of structure along public way	Height of structure	Depth of structure	Height above grade	Total depth over public way	Is this sign(s) illuminated? (Y/N)	Is this an Existing Public Way Use (Y/N)
<i>m</i>	<i>i</i>	<i>z < /</i>	<i>10'</i>	<i>i</i>		<i>l'</i>		
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See example of required plans beginning on page 4.

NOTE: Pursuant to section 2-154-030 of the Municipal Code of the City of Chicago the Corporation Counsel of the City of

Chicago may require any such additional information from any applicant to achieve full disclosure relevant to the request for action by the City Council or other city agency. Pursuant to section 2-154-020 of the Municipal code of the City of Chicago any material change in the information required above must be provided by supplementing this statement at any time up to the time the City Council or any city agency takes action on the application.

City of Chicago | Department of Business Affairs and Consumer Protection | Public Way Use Unit ■
business affhuk a Business Assistance Center | City Hall, Room 800 | 121 North LaSalle Street | Chicago,
Illinois 60602
-/roiEafcft www.cityofchicago.org/bacp <http://www.cityofchicago.org/bacp> | 312.74.GOBIZ (744.6249) |
312.742.1974 (TTY)

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICANT INFORMATION.

PERMIT MAILING ADDRESS:

LEGAL NAME OF ENTITY: B 6 A<? C k'

STATE:

CITY: Ckrco^o

ZIP CODE:

O |/^4-/\b- - 87-rh J?+
z. *- f\ l "71 d r

CONTACT PERSON:

TITLE: Quner

E-MAIL: yyCThW^m

CONTACT PERSON: \i o M ChoV PHONE: 7173 ~ fl| 6 - J f FAX: /

BUILDING OWNER INFORMATION

NAME:

ZIP CODE: 6 <*> (...?)

ADDRESS: ^ocj K/. " ger4-em-l /ryg"W, -^4/

E-MAIL:

CITY: CK?Qft.«xo

STATE:

PHONE: M^JJf - ^U ti FAX:

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

AWNiNgi

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: [Signature]

TITLE: [Title]

F.E.I.N. or SOCIAL SECURITY NUMBER: [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: [Signature]

DATE: [Date]

WARD: [Ward]

C A G O

312.74.GOBIZ (744.6249) | 312.742.1974 (TTY)

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AFFAIRS &

www.cityofchicago.org/bacp <<http://www.cityofchicago.org/bacp>>

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