

Legislation Text

File #: SO2011-5875, Version: 1

ORDINANCE

NORTHWESTERN MEMEORIAL HOSPITAL Acct. No. 85392- 12 Permit No. 1059695

Be It Ordained by the City Council of the City of Chicago:

SECTION 1. Permission and authority are hereby given and granted to NORTHWESTERN MEMEORIAL HOSPITAL, upon the terms and subject to the conditions of this ordinance to maintain and use, as now constructed, two (2) Catch Basin(s) under the public right-of-way adjacent to its premises known as 259 E. Erie St..

Said Catch Basin(s) at E. ERIE measure(s):

One (1) at five (5) feet in length, and nineteen (19) feet in width for a total of ninety-five (95) square feet. Said Catch Basin(s) at N. FAIRBANK measure(s):

One (1) at two (2) feet in length, and nineteen (19) feet in width for a total of thirty-eight (38) square feet.

The location of said privilege shall be as shown on prints kept on file with the Department of Business Affairs and Consumer Protection and the Office of the City Clerk.

Said privilege shall be constructed in accordance with plans and specifications approved by the Department of Transportation (Office of Underground Coordination) and Department of Water Management.

This grant of privilege in the public way shall be subject to the provisions of Section 10-28-015 and all other required provisions of the Municipal Code of Chicago.

The grantee shall pay to the City of Chicago as compensation for the privilege #1059695 herein granted the sum of eight hundred (\$800.00) per annum in advance.

A 25% penalty will be added for payments received after due date.

The permit holder agrees to hold the City of Chicago harmless for any damage, relocation or replacement costs associated with damage, relocation or removal of private property caused by the City performing work in the public way. Authority herein given and granted for a period of five (5) years from and after Date of Passage.

Alderman Brendan Reilly 42nd Ward

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Northwestern Memorial Redevelopment

LEGEND

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APPLICAT1 ON TO USE THE PUBLIC RIGHT OF WAY

City of Chicago Department of Business Affairs and Licensing Public Way Use Unit 333 S. State Street, Suite 310 Chicago, rL 60604-3977 Stan Adams (312)747-9035 or

Lisa Pusaterf (312)747-9034

FAX (312)745-2958

APPLICANT INFORMATION

legal is 4ME of entity: Northwestern Memorial Hospital

permit bailing address : 259 E. Erie Street Suite 448_

city Chicago_state IL_zip code: 60611

contac r person: Bud Vance

title System Engineer

phone[^] 12-926-2917 _{FAX};312-926-7316 email: bvance@nwh.org <mailto:bvance@nwh.org>

USE OF THE PUBLIC WAY

1. List tb: proposed or existing use below and complete the attached worksheet. Only use one applicatic \ per public way use type.

Trpe

How many?

Building Address

Pleast. enclose one sketch of proposed use of the public way, which maps to scale the propc ;ed use and its relationship to surrounding right-of-way. All measurements must be indicated.

The print.. should also accurately depict the location of the property line and public facilities (meters, 1 ght poles, sidewalks).

^3. Pleast provide a full sized 80 Acre map, with the adjacent property and portion of the public w. y clearly outlined. The 80 P ere is available at Maps and Plat in Room 905 City Hall w/\$5.00 fee. APPLIC ^NT CERTIFICATION: I hereby :ertify that all statements made as part of the application and the attachments herein, a id true to the best of knowledge and belief.

Title:_J'yjff^i ^f^rt/f^

xto-Tex)-no

F.E.I.N. ir Social Security Number: ALDER] IAN'S APPROVAL:

As part of this application process, you are required to notify/obtain approval from the Alderman in whose, yard your proposed use of the public way is located.