



Office of the City Clerk

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

Legislation Text

File #: O2011-3238, Version: 1

ORDINANCE

WASHINGTON MADISON WELLS LIMITED PARTNERSHIP Acct. No. 353525-4 Permit No. 1094660

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

SECTION 1. Permission and authority are hereby given and granted to WASHINGTON MADISON WELLS LIMITED PARTNERSHIP, upon the terms and subject to the conditions of this ordinance to maintain and use one (1) sign(s) projecting over the public right-of-way attached to its premises known as 5 N. Wells St..

Said sign structure(s) measures as follows; along N. Wells:

One (1) at four point four one (4.41) feet in length, two (2) feet in height and twelve (12) feet above grade level.

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 Zoning Department - Signs.

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 #1094660 herein granted the sum of one hundred (\$100.00) 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

Page 1

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICANT INFORMATION

LEGAL NAME OF ENTITY: *W^k^ft^ (VjtAistyi KM.< If % ff/Q I^UU Qj> gt^t*

PERMIT MAILING ADDRESS: *IZ.&Je.s+ ?/l<noj< St- £V,i<l SXO " **

CITY: *Chicz^a^* STATE: *X^*- ZIP CODE: *d0£&y*

CONTACT PERSON: *Sut&t^* WjOrrmf TITLE: PHONE:*3tZ-5Z7-^o* FAX: *z* E-MAIL: *~*

BUILDING OWNER INFORMATION

NAME: *Ufl&i/ufvW ftWtgfln U/6»S if*_*

ADDRESS: *^ 5<un<. g,y afc*.^*

CITY: STATE: ZIP CODE: *_*

PHONE: *_FA*_* E-MAIL: *_*

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 *_*

*/Sip I £ a/. U)*Ms*

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 of public way is located.

ALDERMAN'S SIGNATURE: _____

DATE: _____

CHICAGO
BUSINESS

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City of Chicago | Department of Business Affairs and Consumer Protection 1 Public Way Use Unit Business Assistance Center | City Hall, Room 800 | 121 North LaSalle Street | Chicago, Illinois 60602 | www.cityofchicago.org/bacp | <http://www.cityofchicago.org/bacp> | 312.74.6249 | 312.742.1974 (TTY)

Page 2 of 8