

# Legislation Details (With Text)

File #:	O20	11-32				
Туре:	Ordi	nance	Status:	Passed		
File created:	1/13/2011		In control:	City Council		
			Final action:	2/9/2011		
Title:	Issuance of permits for sign(s)/signboard(s) at 1133 N Dearborn St					
Sponsors:	Reilly, Brendan					
Indexes:	SIGNS/SIGNBOARDS					
Attachments:	1. O2011-32.pdf					
Date	Ver.	Action By	Ac	tion	Result	
2/9/2011	1	City Council				
1/25/2011	1	Committee on Buildings	Re	ecommended to Pass		
1/13/2011	1	City Council	Re	eferred		

Committee on Buildings City Council Meeting January 2011 Alderman Brendan Reilly, 42<sup>nd</sup> Ward

### Sign Ordinance

## ORDINANCE

### Be it ordained by the City Council of the City of Chicago:

Section 1. That the Commissioner of Buildings is hereby authorized and directed to issue a sign permit to Flashtric Incorporated, Division of Turk Electric Sign Company, 3434 North Cicero Avenue, Chicaqo, Illinois 60641, for the erection of a sign/signboard over 24 feet in height and / or over 100 square feet (in area of one face) at the 1133 North Dearborn LLC, 1133 North Dearborn Street. Chicago. Illinois 60610 with the dimensions, height and square foot area:

Dimensions: length: 29'-4" height: 4'6"

Height above grade/ roof to the top of the sign: 10'

Total Square foot area: 132 square feet

Elevation: WEST

Notwithstanding any provisions of Title 17 of the Municipal Code, of the City of Chicago (the Chicago Zoning Ordinance) to the contrary, the Commissioner of Buildings is hereby directed and authorized to issue a sign permit to the address referenced within this ordinance. Section 2. This ordinance shall be in force and effect from and after its passage and due publication.

Brendan Reilly Alderman, 42<sup>nd</sup> Ward

# DEPARTMENT OF BUILDINGS

# **Sign Permit Application**

APPROVAL NUMBER APPLICATION NUMBER 100368103 ANNUAL FEE WORK CODE DRAWINGS ATTACHED rj | YES NO DATE OF APPLICATION 10/14/2010 ADDRESS OF SIGN 1133 N DEARBORN ST, 60610-OR1GINAL PERMIT NUMBER type of permit new CONSTRUCTION (SIGN) PAYER OF ANNUAL INSPECTION TRAMBAS, STACY 1333 N KINGSBURY CHICAGO, IL 60642 (312)337-2200 SIGN MANUFACTURER UNKNOWN ADDRESS WHERE SION CAN BE SEEN PRIOR TO ERECTION TICKET NUMBER REINSPECTION CONTROL NUMBER TYPE OF SUPPORT FOR SIGN BUILDING SIGN BOARD SUPPORT MEMBERS STEEL ANNUAL FEE CONSTRUCTION FEE 1017 B FEE TOTAL FEE AMOUNT PAID BALANCE DUE Check # for Zonine

#### 300.00

Check # for DCAP

#### \$ 300.00

type of sign CANOPY Qty: 1 29 N. **4** SQ FT 132 SIGN HEIGHT ABOVE GRADE/ROOF LBS. **250** FT. 10 shape of sign REGULAR SIGN WILL READ 1133 NORTH DEARBORN APARTMENTS

no. of lamps

TOTAL WATTAGE

TYPE OF LAMP

NO. OF BALLASTmiANSFORMERS

INPUT OF TKANSFORMERS

CONTRACTOR WILL INSTALL 1 NI FEEDERS [NJ CUSTOMER LEADS

TYPE OF SWITCH LOCATION OF SWITCH SIGN LOCATION EXISTING CANOPY ON BUILDING ENTRANCE WAY FACING NORTH DEARBORN READS (BLDG ADDRESS) 1133 NORTH DEARBORN APARTMENTS The undersioned certify that the statements in this annlicalinn are true and correct and that all work done under rbe nronosed nermit will conform to the reouiremems of the Chicago Municinal Code ELECT CONTR SUPERVISOR SIGNATURE JM92382 SIGN ERECTOR TURK ELECT. SIGN CO. SIGNER ADDRESS 3434 N.CICERO CHICAGO XXX LL, 60641 The permit issued on this application will authorize only signs here applied for. If other signs are to be erected they must be covered by additional permits City of Chicago Richard M. Daley, Mayor Department of Buildings

Richard Monocchio, Commissioner ES PERM APP WEBCEH0I0808 AP #: 100368103 Pacrp. 1 nf ? TYPE OF BUSINESS RES GRP LIVTNG

Other: PROPERTIES

SIGN BOND REQUIRED?

j∼J YES

#### File #: 02011-32, Version: 1

Name: PLANNED PROPERTY		COUNCIL ORDER REQUIRED	[x] YES
LIC #:	is special permission required from chief electrical $I \mid \! yes \ i$ of request		
Renewal Date:			
Projects Over: [n] Private Property lYlPublic Way #: 1093459	Grant Permit		
0 Planned Development/Manufacturing PMD/PD#: PD District. OTHER Other: PD344	344 Zoning	TIME STAMP	
TYPE OF SIGN:   1 ADVERTISING [~J ILLUMINATE fxl BUSINESS I""  FLASHING	~J MOVEABLE		
TOTAL STREET FRONTAGE OF LOT (IN FEET)	175		
TOTAL AREA OF NEW SIGN (SQ.FT.)	132		
TOTAL AREA OF ALL SIGNS ON LOT (SQ.FT.) 130			
HEIGHT OF SIGN ABOVE GRADE (TO TOP)	14ft 6in		
DISTANCE OF CURB LINE OUTER EDGE (ft) 19 DISTANCE OF STF EDGE (ft) 21	SIGN CLERK	APPROVED FOR PERMIT	
DISTANCE FROM (ft): A. PUBLIC PARK (OVER 10 ACRES) 1,000 B LESS THAN 1,000 FT.) 9,999 C. RESIDENCE DISTRICT (ADVERTISI 1,000	REMARKS		
IF REPLACEMENT SIGN OR CHANGE OF FACE, WHAT DOES THE EXISTING Original Payee:	SIGN READ?		
Landmark Hold: 1   Status: ZONING (OFFICE USE ONLY)			
· · · · · ·			
ES_PERM_APP_WEB CEH0I0808 AP #.100368103 Page 2 of2			
<b>CITY OF CHICAGO DEPARTMENT C</b>	F ZONING AND	LAND USE PLANNIN	G
SIGN SITE PLAN			0
(ALL INFORMATION MUST BE COMPLETE	D AND LEGIDLE)		
Site Address: $_{113}$ * m, $_{Wn} \ll _{6gC}$ , io			
u«ILl~			
Sign Company: FlosUw. Wy <sup>^</sup> mv, jH <sup>^</sup> SSni Pho	one (773) i&> - /	3oc	

w

SIGN USE: Bus. ID (On-premise) Business Lice. # Advertising (Off-premise) PERMIT TYPE:

New Construction-cxisfin Change of Face Previous Permit #

of \o applications fevcifru. S4y c&.Rep Name: •=^vy>\^

### it -.mm

*lot'or structure)* 

East

Flat Wall Freestanding Awning -ca\*opy Marquee High Rise Building Projecting Private Projecting Public Way Public Way Use -Permit # CTERISTICS: Hon- Illuminated K. Illuminated D Changing Image D Video Display 

Flashing **DISTANCE FROM:** 

<u>Curb Line: iq</u> TOTAL SQUARE FOOTAGE: **Square footage of this proposed sign** Gross area of all proposed signs Area of all existing signs (not including proposed) on Zoning Lot\_q\_ <u>Expressway, Toll Roads or Major Route (n/a if over 1000 ft) q. <m Park (over 10 acres) \ c&o Residential Zone</u> <u>i.poo Existing Off-premise on same side of street: r\jn</u> Signature : (Revised 4/10)

Pate: ib is-io

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,J sr.

NATIONAL SURVEY SERVICE, INC. ALTA/ACSM LAND TITLE SURVEY ---Jpint of Surury

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PARCEL ,/1 -PARCEL 3^

-err

# 1>

sjigi isnar."\*ar. s i svs wwss--PARCEL 2•

PARCEL 4

## r

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GRAPHIC SCALE

# Apartments

# 1133 North Dearborn

#### **PUBLIC WAY USE UNIT: PERMIT INFORMATION SHEET**

10/12/2010-John Mariane **DBA Name** Location Zip Code Account Number Site Number Area **Permit Type Permit Number** 1133 n. dearborn 11c 1133 N. DEARBORN ST. 60610 357076 1 PERMIT CAN 1093459

Next steps: Department of Buildings - Permit process for signs

Your Public Way Use permit number is shown above. This number is to be used for each item on your DOB application and is needed for the Buildings (DOB) online sign application located @ www.cityofchicago.org/buildings

<http://www.cityofchicago.org/buildings>. All signs, canopies, banners, marquees and awnings require a buildings permit. Only a licensed sign erector may apply for the Buildings permit online. The Buildings permit application will ask for the Public Way Use permit number supplied above. For additional information please contact the Buildings Department at (312) 744-3400.

Please return the completed Public Way Use application to City Hall -121 N. LaSalle Street, Chicago, IL 60602 Room 800. The completed application package must include a copy of the completed DOB application and the Public Way Use application. The Public Way Use application must contain the Alderman's signature, site plans on 8 1/2 X 11 paper, photos of the item(s), the signed Acceptance letter and a copy of the insurance certificate. For additional information please contact BACP at (312)-74-GOBIZ (312-744-6249).

CITY OF CHICAGO • BACP-PWU • BUNDLE PERMIT APPLICATION • V.04.28.10

# <sup>;</sup> APPLICATION CHECKLIST (continued) -

□ Acceptance Letter

### ACCEPTANCE OF GRANT OF PRIVILEGE PERMIT TERMS

I hereby understand and accept the terms and conditions relative to the issuance of the permit, and by signing below, I acknowledge the receipt of a copy of the Municipal Code of Chicago's 10-28 and 13-20 regulations, as well as all the additional requirements promulgated herein:

I understand it shall be my duty as the permit holder, and as a condition of the permit, to:

1. Comply with all the requirements defined within Chicago's Municipal Code, the Rules and Regulations, as well as the requirements promulgated herein;

2. Upon the passage of the permit ordinance at City Council, pay the non-refundable applicable Grant of Privilege annual permit fee .

3. Upon the submission of the permit application the applicant shall furnish the certificate of insurance; and,

4. Resolve all Account Holds since failure to do so will prevent the processing of this permit application;

5. Install or maintain the grant of privilege after the issuance of the permit by the Commissioner of Business Affairs and Consumer Protection;

I hereby agree to accept the terms and conditions relative to issuance of the permit.

I agree to renew the Certificate of Insurance at least 10 days prior to expiration of the policy.

I understand that if the item or items are not constructed/maintained the permit fees will not be refunded.

I understand that failure to adhere to all conditions imposed in the permit may result in revocation of the permit. SIGNATURE:

PRINT NAME: <u>u^(rT^v~b^</u> ⊻<u>TITLE:</u> <sup>1</sup>

ACCOUNT #: \_\_SITE # LEGAL NAME OF ENTITY: [\?>& frj , V^m^bfl/n tL-LC, BUSINESS NAME (DBA): BUSINESS LOCATION ADDRESS:' 11J^j?T^ fagOIrttHtO f CITY: Chicago STATp/ino/s" ' ZIP CODE: (pO^jT) BUSINESS RHONE: 31\*-^"KXAOO J^H-\. E-mail: <y-r-qgxj ft. f pm (^par-Wvi/^-TS . C (nrvx)

PERMIT TYPE:

Department of Business Affairs and Consumer Protection • Business Assistance Center Public Way Use Unit 
City Hall, Room 800 • 121 North LaSalle Street, Chicago, Illinois 60602 co«u«" nonEm www.cityofchicago.org/city/en/depts/bacp <http://www.cityofchicago.org/city/en/depts/bacp> • 312.74.GOBI2 (744.6249) • 312.742.1974 (TTY) CITY OF CHICAGO • BACP-PWU • BUNDLE PERMIT APPLICATION 
V.04.28.10

# ' - APPLICATION TO USE THE PUBLIC RIGHT OF WAY

DOB PERMIT \*:

AMNESTY ELIGIBLE? • YES • NO

#### APPLICANT INFORM A TION

LEGAL NAME OF ENTITY: W\*p^ ^gav^O/WI \_ PERMIT MAILING ADDRESS: t3gg> f^. \iUrtcp\>\i\*v\ \_ <u>CITY: LAyv\ Cqc^I) STATE: -"PL. ZIP CODE: (J?U(g4JL</u> CONTACT PERSONnVO>vi\QttS

TITLE:

PHONE^iA. - S^OD FAX: -33^ <2 S^O

### BUILDING OWNER INFORMATION name, lift?) N\*. fceatrbc^rv t LLP

E-MAIL

ADDRESS:P^ M. VUnCAIOQV^ ' CITY: ^TATE: PHONE^a.^yi.-^

#### L/SE 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.

#### ZIP CODE: lpQte 4

E-MAIL:^rfe> Q ppr\* apcf-WAfl vdf \*.

TYPE

HOW MANY? BUILDING ADDRESS

### <u>bno 11???) hr^vjcW^T</u>

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 beliefs

#### <u>BY: ^^ty^^UMAA-- ^Q(HT\_TITLE: 9fo|\l0</u>

F.E.I.N. or SOCIAL SECURITY NUMBER: 2\&-^3Ti tyZtfk

#### 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 DATE: e ot the pi iWARD:

CHICAC

Department of Business Affairs and Consumer Protection ■ Business Assistance Center Public Way Use Unit ■ City Hall, Room 800 • 121 North LaSalle Street, Chicaeo, Illinois 60602 coSm"SSft'^oN www.cityofchicago.org/city/en/depts/bacp-<hr/><http://www.cityofchicago.org/city/en/depts/bacp-> 312.74.GOBIZ (744.6249) • 312.742.1974 (TTY)

#### Page 7 of 13 -CITY Q.F CHICAGO • BACP-PWU. • BUNDLE PERMIT APF **APPLICATION TO USE THE**

# APPLICATION TO USE TH

m For use by NEW APPLICANTS ONLY. S For renewals obtain form from City Ha (744-6249) Complete the worksheet for each use of the c ICATION • V.04.28.10

# PUBLIC RIGHT OFFVAY

121 N. LaSalle St., Rm. 800 or call (312) 74- GOBIZ lie way and indicate all applicable measurements.

4 5'

# 1

# M

See example of required plans beginning on

NOTE: Pursuant to section 2-154-030 of the Municlial Code of the City of Chicago the Cor joration Counsel of the City of Chicago may require any such additional information from any applicant to achieve full request for action by the City Council or other citylagency. Pursuant to section 2-154-020 City of Chicago any material change in the informition required above must be provided by supplementing this statement at any time up to the time the City Courlil or any city agency takes action on tr e application disclosure relevant to the )f the Municipal code of the

Department of Business Affairs and (jDnsumer Protection Public Way Use Unit 
City Hall, Roim 800 cowfM. PsoTE^ai:
www.cityofchicago.org/city/en/d=r4s/Da-P <a href="http://www.cityofchicago.org/city/en/d=r4s/Da-P">http://www.cityofchicago.org/city/en/d=r4s/Da-P</a>
Business Assistance Center 121 North LaSalle Street, Crjicago, Illinois 60602 312.74.GOBIZ (744.6249) • ?312.742.1974 (TTY)
<a href="http://www.cityofchicago.org/city/en/d=r4s/Da-P">Client#: 73744</a>
PLANREA

# AQQRD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 9/28/2010 PRODUCER Murphy Team Mesirow Insurance Services, Inc. 1500 S. Lakeside Drive Bannockburn, IL 60015

THIS CERTIFICATE IS **ISSUED AS A MATTER** OF INFORMATION ONLY AND CONFERS NO **RIGHTS UPON THE** CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW **INSURERS** NAIC# AFFORDING COVERAGE INSURER Steadfast Insurance INSURER American Guarante26247 INSURER INSURER D INSURER

INSURED Planned Realty Group, Inc. 1333 N. Kingsbury, Suite 301 Chicago, IL 60622

#### COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

F

LTR jsdtt NSRC TYPE OF INSURANCE POLICY NUMBER POLICY EFFECTIVE DATE (MM/DD/YY) POLICY EXPIRATION DATE (MM/DD/YY) IMITS GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE SCO374374310 06/01/10 06/01/11 EACH OCCURRENCE BI/PD Ded:10,000 DAMAGE TO RENTED PRFMISFS/Fa occurrence! OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE GEN'L AGGREGATE LIMIT APPLIES PER: POLICY PRODUCTS - COMP/OP AGG PROJECT <u>s1,000,000</u> <u>S50.000</u> \$-11,000,000 \$5,000,000 51,000,000 AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS SCO374374310 06/01/10 06/01/11 COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) GARAGE LIABILITY ANY AUTO AUTO ONLY - EA ACCIDENT OTHER THAN AUTO ONLY: EXCESS/UMBRELLA LIABILITY X OCCUR CLAIMS MADE AUC926584800 06/01/10 06/01/11 EACH OCCURRENCE \$25,000.000 AGGREGATE \$25,000,000 DEDUCTIBLE RETENTION \$0 WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below\_ WC STATU-TORY I IMITS OTH-FR E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT OTHER DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS City of Chicago, its agents and employees are listed as additional insured in regards to canopy, awning and signs. see attached page for locations. (See Attached Descriptions) CERTIFICATE HOLDER CANCELLATION 10 Days for Non-Payment City of Chicago-Office Public Way Use Unit 121 N LaSalle St. Room 800 Chicago, IL 60604

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION rIATF THEREOF. THF ISSUING INSURER WILL ENDEAVOR TO MAIL 50 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE

ACORD 25 (2001/08) 1 of 3 #S807433/M751445 KY9 © ACORD CORPORATION 1988

#### S

#### IMPORTANT

If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

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If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). **DISCLAIMER** 

The Certificate of Insurance on the reverse side of this form does not constitute a contract .between the issuing insurer(s), authorized representative or producer, and the certificate holder, nor does it affirmatively or negatively amend, extend or alter the coverage afforded by the policies listed thereon.

ACORD 25-S (2001/08) 2 of 3 #S807433/M751445

## **DESCRIPTIONS** (Continued from Page 1)

RE: 1940 N. Lincoln 2727 N. Clark 2756 N Pine Grove 501-509 W. Diversey 632-644 W. Addison 634-643 W. Cornelia 430-446 W. Diversey 2811-2815 N. Pine Grove 3435-3441 N. Broadway 596 W Hawthorn 515 W Briar 1049 W Oakdale 455 W Wellington 3130 N Lake Shore Drive 1120 N LaSalle 1111 N Dearborn 1133 N Dearborn

AMS 25.3 (2001/08) 3 of 3 #S807433/M751445