



# Office of the City Clerk

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

## Legislation Details (With Text)

**File #:** O2011-2284  
**Type:** Ordinance  
**Status:** Passed  
**File created:** 4/13/2011  
**In control:** City Council  
**Final action:** 7/6/2011  
**Title:** Loading/Standing/Tow Zone(s) at 17 N Wabash Ave  
**Sponsors:** Reilly, Brendan  
**Indexes:** Loading/Standing/Tow Zones  
**Attachments:** 1. O2011-2284.pdf

Date	Ver.	Action By	Action	Result
7/6/2011	1	City Council	Passed	Pass
7/5/2011	1	Committee on Pedestrian and Traffic Safety	Recommended to Pass	Pass
4/13/2011	1	City Council	Referred	

Committee on Traffic Control and Safety City Council Meeting April 13, 2011 Alderman Brendan Reilly, 42<sup>nd</sup> Ward Loading Zone Memorandum

### MEMORANDUM FOR TRAFFIC REGULATIONS

#### 15 MINUTE (VALET) LOADING ZONE - NO PARKING TOW ZONE:

Street, etc

North Wabash

Location, etc:

17

Distance or extent:

2 Car Spaces

Hours:

5:00A.M. to 2:00A.M.

Days:

All Days

Billing and Contact Information: The Shops on Wabash LLC c/o Tom Sotos 17 North Wabash Chicago, Illinois 60602 312-229-6600

BRENDAN REILLY Alderman, 42<sup>nd</sup> Ward

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

### Standing/Loading Zone Application

Please submit the following items with your application (incomplete applications will not be reviewed):

Letter requesting a standing or loading zone, detailing the reasons the zone is needed. </ Photographs of the proposed location, adequately documenting the .area surrounding the proposed

/standing/loading zone. Diagram or map detailing .the building,, sidewalk, street, existing parking restrictions (meters, other loading zones, etc:) and location of the proposed standing/loading zone.

Please submit completed application to Alderman Reilly's Constituent Service Office: 325 West Huron Street, Suite 510 Chicago, Illinois 60654 (312) 642-4242 (312) 642-0420 (fax) pr6jects@ward42chicago.com <mailto:pr6jects@ward42chicago.com>

#### BUSINESS INFORMATION

Business Name: \_ Business Address:.

Billing Address: P7 • UP & ftvS> H

Federal Identification Number:.

Tax Exempt Designation: \_ ' \_

Present parking regulations at your location (e.g., meters):. Business Hours:.

Scope of business activity:

Business licenses held:.

Contact name and title:

Contact phone. number^IPv-^- ^^00 Email: \*ToM Q S^TPSL.fto3 flilf4 ■ CdiA.

Signature of appHcant-'^^51\*""^ / ' ^^^y--^ \_ Date: