

DOBPEHMTT*:

AMNESTY EUG: YES

☐ NO

APPLICANT INFORMATION

LEGAL NAME OF ENTITY: kl,*\CO Muff/eSS -f 7>rtJTeS
PERMIT MAILING ADDRESS: <. ^srcr* aVC
CITY: C4vt<:o.<HO STATE: zr/IT^rs ZIP CODE: /bo6>3l£>
CONTACT PERSON: AAarh'H hKt^ TITLE: .
PHONE: 77V 7*37- f ^QO FAX: -p^ , 7V1 » ^ o«y E-MAIL: .

BUILDING OWNER INFORMATION

ADDRESS: 5-/3./ n#U Me
CITY: . STATE: ^A ZIP CODE: ^3(H¥
PHONE: 7/S--T^LQ> -?/^y FAX: . E-MAIL: .

{/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.

TYPE	HOW MANY?	BUILDING ADDRESS
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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: /s6t<s"/s&a.

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: fW'~*j*4**^vM*f^~

DATE: fSLfdsteilH-

WARD: I to

B

CHICAGO

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B4J5INI55 AFFAIRS A COISOMU CKOTKDON

Department of Business Affairs and Consumer Protection (BACP) • Business Assistance Center (BAC) Public Way Use Unit (PWU) • City Hall, Room 800 ■ 121 North LaSalle Street, Chicago, Illinois 60602 www.dTyofchfcago.org/bacp <<http://www.dTyofchfcago.org/bacp>> •

312.74.G08IZ (744.6249) • 312.742.1974 (TTY)

01-14-13:01:02PM;

CrTY OF CHICAGO ■ BACP-PWU ■ BUNDLE PERMIT APPLICATION . V.09.28.10

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICATION WORKSHEET

*3 For use by NEW APPLICANTS ONLY.

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

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

Exact Street (i.g. o. oidle ol.;	Quantity of structure along public way	Length of structur e	Height of structur e	Depth of structur e	Height above grade	Total depth over public way	n £ 3 mm £ - M	' Is this an Existing Public Way Use (Y/N)
fey Y						.0		

55

CO

O -I

Soo example of required plans beginning on oaoe 5.

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 Cily 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 bo provided by supplementing this statement at any time up to the time the City Council or any city agency takes action on the application.

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■ ■ p^ynopj Department of Business Affairs and Consumer Protection (BACP) • Business Assistance Center (BAC) fw^k-K.F* PobUc Way Use Unit (PWU) • City Hall, Room 800 - 121 North LaSatte Street, Chicago, Illinois 60602 @8\$2Sgl&ti&_ & www.cityofchicago.orB/bacp <http://www.cityofchicago.orB/bacp> • 312.74.G0BIZ (744.6249) • 312.742.1974 (TTY)

Date:

5/17

72-27-12

SalesPerson:

Address: 5700 S. Western Ave. Chicago IL

Awnings Express

Office: (773) 579-143/ Fax:(773) 863-5669

LENGTH ALONG PUBLIC WAY

WHITE
mam

0'
outTo
PUBLIC

PARKING

LOT

6
P i-
N 10
9'

ELEVATION:

S
Western Ave.

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 application 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: A/bis1* Xs£-x>

PRINT NAME: A4tfHr*,V» £46 v.*

^ F.E.I.N. or SOCIAL SECURITY NUMBER:

DATE: p.A7-r^

TITLE: JUasmmcM.

ACCOUNTS STATE

LEGAL NAME OF ENTITY: /VWJ-jVv IA^ZXK ~ BUSINESS NAME (DBA): ffi^r^ <^ kA 4--ftr<^<>

BUSINESS LOCATION ADDRESS: /T700 fj. uJu&c/h /4Vc

CITY: Chicago

STATE: Illinois

ZIP CODE: U> 6 tai la

BUSINESS PHONE: 773 - 73 1 ■ ^OO

E-MAIL

PERMIT TYPE: h/a-h

CHICAGO

City of Chicago Department of Business Affairs and Consumer Protection (BACP) ■ Business Assistance Center (BAC)
Municipal Public Way Use Unit (PWU) • City Hall, Room 800 - 121 North LaSalle Street, Chicago, Illinois 60602
www.cityofchicago.org/bacp <<http://www.cityofchicago.org/bacp>> • 312.74.G081Z (744.6249) • 312.742.1974 (TTY)

01-14-13;01:02PM;

EXPRESS

Quality. Sign*

iii e-mail: Awningexpress@sbcglobal.net <<mailto:Awningexpress@sbcglobal.net>>

Channel Latter*

Veronica D.

8028 S. Western Av. 60620 jf^.

Office (773) 573-1437 Fax (773) 353-6669