

# Office of the City Clerk

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

## Legislation Text

File #: Or2014-556, Version: 1

Committee on Zoning, Landmarks, and Building Standards

(Signs)

ORDERED, That the Commissioner of Buildings is hereby directed to issue a sign permit to: (Contractor's name and address)

Sign America
2748 West Devon Avenue
Chicago, Illinois 60645

for the erection of a sign/signboard over 24 feet in height and/or over 100 square feet (in area of one face) at: (Business Name & Address)

The Body Shop Inc.
5820 North Western Avenue
Chicago, Illinois 60659

Dimensions: Length 99 feet 6 inches Height 3 feet 0 inches

Height above grade/roof to top of sign 9 feet

TOTAL SQUARE FOOT AREA: 299 feet

PATfcltK J.WCONNOR Alderman, 40th Ward

Such sign(s) shall comply with all applicable provisions of TITLE 17 of the Chicago Zoning Ordinance and all other applicable provisions of the Municipal Code of the City of Chicago governing the construction and maintenance of outdoor signs, signboards and structures.

Oct. 31. 2014 12:59PM 40th 'Aire

CITY OF, CHICAGO

APPLICATION NUMBER

DRAWINGS dYES ATTACHBD  $Q_{N0}$  100537240

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ORJOINAL PERMIT NIA4BER

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3820 N. WESTERN AVE CHICAGO, IL 60659

(773)784-2650

PT. 99 N. 6 KS1CIIV rr. 3

sq.rr. 299

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ehaMofiign REGULAR

SIGN WILL READ

THE BODY SHOP

us. **200** 

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SIGN AMERICA

ADDUU wWUSIOrlCAWBESEENrWORTOSIECTION

NO. OF aAUASTrTRANSrORMEM

RtINSHCtION CONTROL NUMBER

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ANNUALFEE CONSTRUCTION PBB 1017 6 FEE

total fee amount paid balance dub

Check # for 2oning

700.00

5820 N WESTERN AVE, 60659-

200.00 Check # for DCAP

\* 500.00

LOCATION OF tWrrCH

SIGH LOCATION

AWNING & SIGN FACING EAST. 5S20 N WESTERN AVE. CHICAGO, IL 60659

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SIGN AMERICA

ADDRESS

2748 WDBVON AVE CHICAQO XXX IL. 60645

SUPERVISOR SIGNATURE

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City orchtMgo Rahra Emanuel, Mtayor

Department of Buildings FcUcla Davis, CommissioDer

ES PERM APP WEBRD06021I

Oct. 31. 2014 12:59PM

40th Ward

TYPE OF BUSINESS

COMMERCIAL

N.nw: .THE BODY SHOP ItVC

LIC ft.

Renewal D\*»: IW15/2015'

Projects Over: iNlPrtvveFroptrtv

[Ylfublic'WiY] Gisnt Permit«: U 0683 5

□yes

SION BOND REQUIRED?

COUNCIL ORDER.RBQUIRBD

is special permission required from chief electrical Qybs

ip yes, attach letter op request

TYPBOFSrON: Q ADVERTISING

[X] BUSINESS

Q Planned Development/Manufacturing PMD/PDd:

Zoning Dfetrici: \_Cl

Oihet: Cl-2

□ illuminate Q MOVEABLE

Pi FLA3HINO

TOTAL STRBBT PRONTAGB OF LOT (IN FEET)

TOTAL ARS A OF NEW SION (SQ.FT.)

TOTAL AREA OF ALL SIGNS ON LOT (SQ.PT)

HEIGHT OF SION ABOVE ORADE (TO TOP)

DISTANCE OF CURB IINB OUTER EDGE (ft) DISTANCE OP 5TRUCTURB INNER EDGE (ft)

DISTANCE FROM («)•

V PUBUC PARK (OYER »0 ACRES)

3 EXPRESSWAY (IF LBSS THAN 1,000 FTJ

: RESIDENCE DISTRICT (ADVERTISING SIGNS ONLY)

? REPLACEWHI SION OR OUHOB OT FACE. WHAT DOES WE EMSTWO SIQN CHAD?

)rigiiial Payee:

Landmark Hold: Status:

:ONrNO (OFFICE USE ONLY)

i PERM AFF WES RDP592J1

No. 9404

#### Oct. 31 20U 1:00PM 40th Ward

■ Cirf OF CHICAGO ■ BACP-PWU • GRANT OF PRIVILEGE PERMIT APPLICATION ■ V.01.17.13

## APPLICANT INFORMATION

LEGAL NAME OF ENTITY: T-H£ fctPPV SHOP Of Wg^T&^y Pfl%,

PERMIT MAILING ADDRESS: gg&Q rV> W^STS^\*/ fV V\_

CITY: <^TCfrf>fJ> STĂTE: IL ZIP: frfffrSQ CONTACT PERSON: VQI» MTTB-V TITLE: OU/^fe-R

PHONE: t>7^w7tH"Si&50 FAX: 972^^' 1ZTQ5 E-MAIL: T^6.g>CXP7^HOPPFLQ;H

## PROPERTY OWNER INFORMATION

NAME: Vft-L^ft; MYT^A/

"ADDRESS: b%9UQ ^> Wksmg-V PtVjL . ,

CITY: &Hi C^t-&0 STATE- )L ZtP-frqfrS6?

## USE OF THE PUBLIC WAY

1. List the proposed or existing uso(s) below, and complete the worksheet on page 3. Use only one application for all public way use typs.

#### **TYPE** HOW MANY? BUILDING ADDRESS

- 2. Pleas© enclose one sketch of proposed use of the public way, which maps to scale the proposed U6e and Its relationship to surrounding right-of-way All measurements must be Indicated.
- 3. All "No Fee" Items require a \$50 application fee. Please remit with application.
- 4. "No Fee" items are listed In the priceillst on page. 6,....
- 5. The prints 6hould 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: V/frl^q: TITLE: OWV&Jk

F,E.I.N. or SOCIAL SECURITY NUMBE

## ALDERMAN'S APPROVAL

As pBrt of this application process, you are required to notify/obtain approval from the Alderman In whose ward your proposed use of the pu^Wway Is located.

ALDERMAN'S SIGNATURE

City or Chicago i Department of Business Affairs and Consumer Protection | Public Way Use Unit SiHttfXiwK\*

Busine5S Assistance Center | City Hall, Room 800 | 121 North LaSalle Street | Chicago, Illinois 60602 wMmplohAion
www.c1tyofchicago.Drg/bacp <a href="http://www.c1tyofchicago.Drg/bacp">http://www.c1tyofchicago.Drg/bacp</a> | 312.74.GOBIZ (744.6249) | 312 742.1974 (TTY)

Oct. 31. 2014' i: 00PN

,fp -' ft CIT-Y' Of-..WJ^fCABO

APPLICATION NUMBER 100537240

DRAWINGS D YE5 ATTACHED Q NO

twbofiion AWNING

ADDILSS OF SICW

HEIGHT FT. 40

S»fT. 120

200

NEW CONSTRUCTION (SIGN)

**FAYER OF ANNUAL WSrtCTION** 

NASTALY, IUCKJ. 5820 N. WESTERN AVE CHICAGO, IL 60659

(773)784-2650

shape or sioh REGULAR

5I0N»TU.R£AD

5820 N WESTERN AVE, 60659-

THE BODY SHOP

SIGH MANUFACTURER

SIGN AMERICA

TICKET NUMBER

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STEEL

Tv?50FH»jo»rFoisioN BUILDING

SION SOARD SUWOItT 1EUB1IU

200.00

200.00

200.00

#### ANNUAL FEE CONSTRUCTION PBE IOJ7BFEE TOTAL FEE AMOUNT PAID BALANCEDUB

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iNnrr op tiwsfokneu

H8 coirnunoXWpOlhiTALL [n! retotM [l^J CUSTOMER LEADS

.TYFtCFtwrrcH

**LOCATION OF SWITCH AI^4** 

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SIOW t Unas SION AMERICA

274 8 W DEVON AVE CHICAGO XXX IL, 60645

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City of Chicago Rahm Emanuel, Mayor

Department of Buildings Felicia Davis, Commissioner

ES\_PERM\_APP\_WEB RD06DZ11

#### -Oct. 31 2014- 1:G0PM 40th Win

COMMERCIAL

TYPE

Other. CAR BODY SHOP

Renewal Di'te; 02/15/2015

Name; THS BODY SHOP TNC Lie\*:

GuntPerrailtt il05 B35

Projects Over-. [H]yiiv»te Piopefly

□yes

Jo. 9404 P. 7.

SIGN BOND REQUIRED?

COUNCIL ORDER REQUIRED

is special permission required from chief electrical Qyes

if yes, attach letter of request

	□pUnned Dtvelopmenl/Mwiuftcluripg PMD/PDS:	
	2cnmg Dittricl. Cl	Otber: Cl-2
TYPE OF SIGN: [J ADVERTISING	<del></del>	
[g] BUSINESS		
f~l ILLUMINATE Q MOVEABLE		
□ FLASHJNO		
TOTAL STREET FRONTAGE OF LOT (IN FEET)		
TOTAL AREA OF NEW SIGN (SQ.FT.)		
TOTAL AREA OF ALL SIGNS ON LOT (SQ FT.)		
HEIGHT OP SION ABOVE GRADE (TO TOr)		
DISTANCE OI CURB LINE OUTER EDGB (ft) DISTANCE OF STRUCTURE INNER BOOE (fl)		
DJS TANCB FROM (ft)'		
A. PUBLIC PARK (OVEft 10 ACRES)		
B. EnRESSWAY(ffUESTrIANOfIOFT.)		
C. RESIDENCE DISTRICT(ABVERTISINOSIONS ONLY)		
TP S£PLAC£MBKI SIGN OR CKAKOE OF FACE, WHAT DOES THE EXUTIVO SIGN RE AW		
Original Payee:		

## APPROVED PUBLIC WAV»^L

File #: Or2014-556, Version: 1

Landmark Hold: □ Stttui:

ZONING (OFTCBUSE ONLY)

ESJ>ERM\_APPJWEB RD0S02I1

#### LIC ,,k\ uj^UNIT; PERMIT INFORMATION SHEET

05/24/2013 - Stan Adams DBA Name Location Zip Code Account Number Site Number Area- • Permit

**Type Permit Number** 

THE BODY SHOP INC

**S820 N. WESTERN AVE.** 

60659

278294

1

**PERMIT** 

Next steps: Department or Buildings - Permit process Tor signs

Your Public Way Use permit number is shown above, This number Is (o be. usbc! for each item on your DOB application and Is needed for the Buildings (DOB) online sign application located @ www.cityofcbicago.org/buildlngs <a href="http://www.cityofcbicago.org/buildlngs">http://www.cityofcbicago.org/buildlngs</a>. AH signs, canopies, banners, marquees Bnd awnings require a buildings permit." Only a licensed gteti erector may anply foif the Buildings permit ofillne. 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 Uic 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 Aldermen's signature, site plans on 8 1/2 X11 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 (312-714-6249).

Oct. 31. 2014' 1:01PM, 40th toard CITY OF CHICAGO No. 9404 \* ?. 11
' • • - DEPARTMENT OF- ZOXLNG A^ LATO TJSE PLANNING
SIGN SITE PLAN (ALL MFOMMATIONMUST BE
COMPLETED AND LEGIBLE)

Site Address:  $f?2\sim Q$  A/ - IV £ A(  $\land$  CU IYA \*  $\circ$ , ILI $\land$   $\land$  of J\_ applications

 $Company; \_^y^{//} <^4y)1 pJz^{C^H}$  Repjjame: e\\$gJj.j\%L

Phone(#-j ) JtAX - ?X $\sim$ erO EXT  $^{\bullet \wedge \bullet \bullet \bullet * \wedge |B_{v}, ?}S_{v}(V_{i}|$ 



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RS-3 Wes-

SIGN USE: Bus. ID (Oa-premise) Business Lice. #.

TYPE OF SIGN:
Flat Wall ; □
Freestanding □

Advertising ivii-premise) Q

Awning

Marquee D High Rise Building □

PERMIT TYPE: Ne-^CoDStwctiori Change ofFace Previous Permit #

**Projecting PrivateD** 

0

Projecting Pub|ic Way D Public Wav Use. 'permit #•

TOTAL SQUARE FOOTAGE: Square footage of this proposed sign }2-Q Gross area of all proposed signs J\$po Area of all existing signs (not including proposed) on Zoning Lot SIGN CHARACTBRISTI Non- IHuminated iUuminated. Changing Image Video Display Flashing

#### PISSFANCE FROM; Curb Line: IS FT

Expressway, Toll Roads or Major Route (n/a if over 1000 ft) Park (over 10 acres') /V/a Residential Zone a/A Existing Off-prenuse on same side of street:

Date: 4~2-\-)4-

 $1:C1^3V$  40th Wire

## CERTIFICATE OF LIABILITY INSURANCE

?. 9

OP ID; CP

PATE (MM/DD/YYYY)

04/17/2014

THIS CERTIFICATE IS ISSUED A3 A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS

CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S). AUTHORIZED

REPRESENTATIVE OR PRODUCER. AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder Is an ADDITIONAL INSURED, tha policy(les) must b» endorsed. If SUBROGATION 13 WAIVED, subject to lhe terms and conditions of the policy, certain policies may require en endorsement. A statement on (hie certificate doss not confer rights to the

Avenue Chicago, IL 60659

 producer
 Phone: 312-346-2150

 BYRNE.BYRNE 4 COMPANY
 " V<t \*Z 120</td>

 SOUTH LASALLE STREET
 Fa\*; 312-346-4637

insured The Body Shop-Western Ave., Inc. 5820 N. Western

name?\*\* Clyda Patterson

CHICAGO, IL 60B03 Clyde Patterson SK,^.312-456.2089

address clydep@byrnobyrno.com <mailto:clydep@byrnobyrno.con

Itt&M\* 312-346-4637

INS UREH|S) AFFOBOINO COVERAGE NAIC»

wtuRERA: Cincinnati Insurance C10677

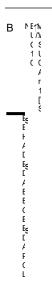
insurer Br Carolina Casualty Insu

INSURER C:

INSURER D,

INSURER E:

INSURER f!



descripti Chicago N. Waste

CITYO-3 Chicago Dept.ot Transportation Driveway Permits 121 N. LaSalle St., Room 905 Chicago, IL 60602  $\rm i$ 

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
AUTHORIZED REPRESENTATIVE

ACORD 25 (2D10/0S)

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