

Office of the City Clerk

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

Legislation Text

File #: O2011-992, Version: 1

NOBLE DAY CARE, L3C

1333 W. CHICAGO AVE. CHICAGO, IL 60642 07-13-2010

Fx/I FT

2 FT Proje ction

MBB OR as permitted by City of C

PROPOSED BUILDING ELEVATION

Wheeler Kearns

343 S Dearborn St Ste 200 Chicago Illinois 60604 312 939 7787

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

APPLICANT INFORMATION

LEGAL NAME OF ENTITY: NOBLE DAY CARE, L3C

PERMIT MAILING ADDRESS: 343 SOUTH DEARBORN; SUITE 200 ;

CITY: CHICAGO STATE: IL ZIP CODE: 60604

CONTACT PERSON: LAWRENCE P. KEARNS_TITLE: PARTNER_

PHONE: 312.939.7784 X 107 FAX: 312.939.5108 E-MAIL: larry@wkarch.com <mailto:larry@wkarch.com>

USE OF THE PUBLIC WAY

1. List the proposed or existing use below and complete the worksheet on page 3. Use only one application per public way use type. TYPE_ HOW MANY? BUILDING ADDRESS__'__

AWNING 1 1333 WEST CHICAGO AVE, CHICAGO, IL 60642

2. Please enclose one sketch of proposed use of the public way, which maps to scale the proposed use 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: JAMIE THOMAS TITLE: DIRECTOR

F.E.I.N. or SOCIAL SECURITY NUMBER: 26-3214132

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'Ś

OMAN'S SIGNATURE ._ CHICAGO



WARD DATE

City of Chicago | Department of Business Affairs and Consumer Protection | Public Way Use Unit Business Assistance Center I City

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