

Legislation Text

File #: 02011-1082, Version: 1

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

LEGAL NAME OF ENTITY: APPLICANT INFORMATION **PERMIT MAILING ADDRESS:** CITY<v& STATE ^' ZIP CODE: 4>&&fV -fa CONTACT PERSON; fioJje, Cj&nTT&l "Dinsc-br, Concept t>ye.l op r title T^esiflh * ^forc Phwyna foV **EMAIL:** iT«itI' lew nibmlt «B of vonr wallcilton material! via nail ofMcawqUqiatceintd. itf ofChiortO epartment of Btutncn **Oalra nd Coumicr Prsttclltn** uMh Way Utt Vail uitomer Service Center 13 & Salt Street, Suite LUO hlaro,IL60«M-39T7 HJ)74-COBIZ (7444249) 17.)74J-I»74(TTY)

^phoneI^)^8^7eaxT 4._

USE OF THE PUBLIC WAY

I. List the proposed or existing use below add complete the attached worksheet Only use one application per public way use type.

Type **A* How many?

idlne Address

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-tftevay. All measurements must be indicated.

The prints should also accurately depict the location or the property line and public facilities (meters, light poles, sidewalks). APPLICANT CERTIFICATION:

I hereby certify t at all statements made as part of (he application and Ihe attachments hegretn. and rfte' o the best of knowledge and belief.

-35^ F.E.I.N. or Soahl Security Number:

<u>**Q0-W6G<W.</u>

As part of (his application process, you are required to notify/obtain approval from the Alderman in whose ward your proposed use of the public way is located.

vLDERMAN-S sign,

