Office of the City Clerk

City Hall
121 N. LaSalle St.
Room 107
Chicago, IL 60602
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Legislation Text

File #: O2011-1189, **Version:** 1

CITY OF CHICAGO ■ BACP-PWU ■ BUNDLE PERMIT APPLICATION • V.04.28.10

APPLICATION TO USE THE PUBLIC RIGHT OF WAY

DOB PEFMrr »:
AMNESTY ELIGIBLE"

APPLICANT INFORM A TION
LEGAL NAME OF ENTITY: b*>QVS
PERMIT MAILING ADDRESS:

4^

CITY: CU.CO
CONTACT PERSO

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STATF- T>4_   ^ J   7IP CC
STATE:
ZIP CODE: (gOfr TITLE:
PHONE:&i3L.ftyT
BUILDING OWNER INFORMATION name: D\vtv£ew/rie,^L f LLC
FAX: • S3q E-MAIL:^ppmqpq^
_'\\ _ _
ADDRESS:\3S2> MI E^y^kuWQ jto
CITY: r.L/vW
STATE:
ZIP CODE:
PHONE:aVA3TT?Q-9PO FAX: 3f»-A.^7. c^^O E-MAIL:jjte? ∟vjppr^v opa^-W^T!. USE OF THE PUBL/C V

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
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:
I.N. or SOCIAL SECURITY NUMBER: -*>(r>-
TITLE:
F.E.I.N, or SOCIAL SECURITY NUMBER: ->(o-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 dfithe publicjway is located. /
Clai/
ALDERMAN'S jIGNAIUr^.X^-'V^ DATE: Cf^/D^ '/[)/ ~7
WARD:

Department of Business Affairs and Consumer Protection • Business Assistance Center Public Way Use Unit • City Hall, Room 800 • 121 North LaSalle Street, Chicago, Illinois 60602 coffi" reDnarofe www.cityofchicago.org/city/en/depts/bacp- <http://www.cityofchicago.org/city/en/depts/bacp->

312.74.G03IZ (744.6249) • 312.742.1974 (TTY)