



Office of the City Clerk

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

Legislation Text

File #: Or2011-679, Version: 1

(Signs)

Committee on Buildings

ORDERED, That the Commissioner of Buildings is hereby directed to issue a sign permit to:

(Contractor's name and address)

North Shore Sign / attn: Skip Spanjer 1925 Industrial Drive

Libertyville, IL 60048 847-816-7020 (T) / 847-816-7145 (F)

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 Address)

MM America HealthCare and Rehabilitation Centre

4920 N. Kenmore Ave. (Zoning RT-4)

Dimensions: Length /3- - Q Height /2 - f> ^/

^ ^ eight above jra^ / roof to top of sign_ ^3

TOTAL SQUARE FOOT AREA / 5"Q

Such Sign (s) shall comply with all applicable provision of Chapter 194A 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, Sign boards and structures.

Alderman, 48th Ward

OWNERS LETTER OF APPROVAL

5-19-11

RE: Sign Permit Applications

TO: City of Chicago City Hall

121 N. LaSalle St. / Room 905 Chicago, IL 60602

Site: Mid America Healthcare and Rehabilitation Centre 4920 N. Kenmore Ave. Chicago, IL 60640-3710

Attn: Department of Buildings

I approve North Shore Sign drawings #09173 page 1, dated - rev. 5-5-11.

North Shore Sign will furnish install SignA: One (1) new set of non-illuminated, cutout letters and logo 12'-5" x 12'-2" reading: Logo "Mid America HEALTHCARE AND REHABILITATION CENTRE". Sign located on the South elevation.

Owner-Landlord: Name Printed: /f/D -A/tc'/t/ctf ^oA/y^cGs-^^-f ^v^_/a/c. Signature:___

Phone#: - ^63 - /5/7

PIN # of site 14-08-410-020-0000

4918 N. Kenmore Ave.

I* ft CITY OF CHICAGO

CM DEPARTMENT OF BUILDINGS

Aldermanic Acknowledgment Letter

TO: Department of Buildings

121 North LaSalle Street, Room 900 Chicago, IL 60602

DATE:

20^/

I am aware of the application for a building permit at the following address. I have no objection to its issuance.

Address:

Date of Application: Type of Permit:

Signed:

Telephone: (T7I)

(Alderman's™! name, printed or typed)

. Richard M. Daley, Mayor City of Chicago

"Quality Signage Since 1930"

NORTH SHORE SIGN

^925 Industrial Drive Libertyville, Illinois 60048 (847)816-7020

RKIPSPANJER fax (847)816-7145

SKIPbMAV cell (262)620-8614

Sales Manager skips@northshoresigns.com <mailto:skips@northshoresigns.com>

196899-19-&-1/D8

ZONING SIGN PERMIT APPLICATION

DEPARTMENT OF ZONING CITY OF CH ICA GO OFFICE OF ZONING ADMINISTRATOR

APPLICATION FOR: North Shore Sign Co., Inc., L i ber t y vi 11 e, IL 6 0 0 4 8

Sign Location: Street Address 4920 N. KenmOIB Ave._

Zoning District

RT-4

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11

to

1408410020

I CEEB It Zoning data rafflods aB ORjinanceaj'l
Coprtht (c)2011.jCoVotChfcaao2_

36

1. Height above Curb Level

2. Non-Illuminated X Illuminated

ft.

in.

Flashing

Moving

3. Gross Area of Sign 150 sq. ft.

4. Total area of all signs on lot T95 sq. ft.

5. Projection over public way 0 ft 0 in.

6. Type of Sign: Business ID. X Advertising_

7. Distance from Expressway (within 1000 ft) N/A

ft.

Is the sign visible from expressway Yes or (^No) (circle one)

8. Distance from Park N/A ft.

9. Distance from residential zone ^ ft.

ALL OF THE ABOVE QUESTIONS MUST BE ANSWERED FULLY

N

W-

SIGNATURE

NOTE: In B6-6 and B6-7 Districts, exact sign copy must be indicated. For Roof Signs, Indicate height above grade_ft.

REVISED 1/90

Southeast elevation East elevation

SITE: 4920 N. Kenmore Ave. Ward # 48 Zoning RT-4

Survey by: North Shore Sign

tSDCAP Sign Permi

DEPARTMENT OF PUBLIC UTILITIES AND PERMITS

<L^> f-^ W -

APPROVAL NUMBER

PERMIT NUMBER

ANNUAL FEE

WORK CODE

DRAWINGS YES ATTACHED

Q no-

CONTRACTOR WILL FILL OUT BLANKS BELOW

DATE OF APPLICATION

BER, DIRECTION AND

ADDRESS OF SIGN (NUMBER, DIRECTION AND STREET NAME) (^Q {q HQ

BUILDING

TYPE OF PERMIT

ORIGINAL PERMIT NUMBER

©

NEW SIGN

ADDITIONAL SEGMENT

0 ©

CHANGE OF FACE

0 ©

REPAIR REMODEL

PAYER OF ANNUAL INSPECTION FEE

ADDRESS

CITY

STATE

SIGN MANUFACTURER

ADDRESS WHERE SIGN CAN BE SEEN PRIOR TO ERECTION

TICKET NUMBER

H

FORM# 1017B

TYPE OF SUPPORT FOR SIGN

REINSPECTION CONTROL NUMBER

BEAM CANOPY

© '

GROUND STRUCTURE

SIGN BOARD SUPPORT MEMBERS

O WOOD

fir

ANNUAL FEE CONSTRUCTION FEE 1017 B FEE TOTAL FEE



PROJECTING OVER PUBLIC WAY

FLAT

Q ROOF

Q SIGNBOARD

PROJECTING OVER PRIVATE PROPERTY

FT. **12** IN. **0** HEIGHT FT. **12-**

SQ.FT.

ISP

SIGN HEIGHT ABOVE GRADE(I)

IN.

LBS.

SHAPE OF SIGN

☐ REGULAR

☐ IRREGULAR

SIGN WILL READ:

L.OCrQ - Alia AMCA USAL7~rttZA£g.

LOCATION OF SWITCH

sign location COPT^/Mio A me f>-IC OU^EW^Hd-ITPi t/0 *J Ceirr\$£ "

s-PieAyeb #cei/cic Poi-fue.^^

The undersigned certify that the statements in this application are true and correct and that all

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ADDRESS \

ADDRESS _ , _

SUPERVISOR SIGNATURE: \

SIGNATURE

The permit issued on this application will authorize only signs here applied for. If other signs are to be erected they must be covered by additional permits.

City of Chicago Richard M. Daley, Mayor

Department of Construction and Permits John A. Roberson, Executive Director

OVER
ATTACH CHECK HERE

ZONING INFORMATION ELECTRICAL INSPECTION INFORMATION

TYPE OF BUSINESS

type of sign: d advertising
0 flashing

☐ illuminated Business

TOTAL STREET FRONTAGE OF LOT (IN FEET) **"2- ^ ~2--**

TOTAL AREA OF N EW SIGN (SQ. FT) **ys"o**

SIGN BOND REQUIRED? ☐ YES 2^NO

COUNCIL ORDER REQUIRED? ^ES ☐ NO

IS SPECIAL PERMISSION REQUIRED FROM CHIEF ELECTRICAL INSF
(m IF YES, ATTACH LETTER OF REQUEST.

TIME STAMP

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

HEIGHT OF SIGN ABOVE GRADE (TO TOP)

DISTANCE FROM CURB LINE OUTER EDGE DISTANCE FROM STRUCTURE
INNER EDGE

SIGN CLERK

APPROVED FOR PERMIT

DISTANCE FROM: A PIIRI in PARK /OVER 10 ACRES) ^ /ft B.
EXPRESSWAY (IF LESS THAN 1,000 FT.) -(H-..... r. RFRinFMr.P nun-Rim-
(AnvPRTisiNR sirimr dni Y)

REMARKS GRC-17521CM9-1

IF REPLACEMENT SIGN OR CHANGE OF FACE, WHAT DOES EXISTING SIGN

READ? **AJ/A**

ZONING (OFFICE USE ONLY) ☐ APPROVED ☐ REJECTED

12'-6"

(A) INDIVIDUAL FCO LETTERS 1/2" = 1'-0"
1" THICK FCO LETTERS / WHITE POLYURETHANE FINISH STUD MOUNTED /1" SPACERS

1925 Industrial Drive Libertyville, Illinois 60048 847-816-7020
"Quality Signage Since 1930"

1/4"ALUMINUM STUD
FCO LETTER MOUNTING DETAIL VIEW
1/4" ALUMINUM STUD

Colors depicted on this drawing are printed simulations to assist in visualizing the design. They do not accurately reflect the actual colors specified.
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MID-AMERICA CARE
CENTER 4920 N. KENMORE
AVE. CHICAC
SCALE NOTED

DATE 1/17/11

SALESPERSON SKIP APPROVED BY:

12'-B"

(A) INDIVIDUAL FCO LETTERS 1/2" = 1'-0"
1" THICK FCO LETTERS /WHITE POLYURETHANE FINISH STUD MOUNTED /1" SPACERS

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CENTER 4920 N.
KENMORE AVE. CHICAC
SCALE NOTED

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1-THICK_
LETTER
-1/4"ALUMINUM STUD
-1/4"ALUMINUM STUD
FCO LETTER MOUNTING DETAIL VIEW

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MID-AMERICA CARE
CENTER 4920 N.
KENMORE AVE. CHICAC
SCALE NOTED

ATE 1/17/11

SALESPERSON **SKIP** APPROVED BY: