

### PRIVATE BENEFIT PARKING CONTROL SIGN REQUEST

This application is to confirm my request for the installation of regulatory parking signs with my understanding that the following is required:

- Introduction of Ordinance by Alderman
- \$100 per sign initial installation (normally 2 signs are installed)
- \$50 per sign annual maintenance fee (assessed 1 year after installation)
- City allows 25 Lin. Ft. of curb space, any additional footage has a surcharge of \$14 per Lin. Ft. which will also be charged along with annual maintenance fee.
- Social Security of FEIN Number
- Installation of signs normally four to six weeks after receipt of fee

### APPLICATION

Name(Applicant/Business) \_\_\_\_\_

Address \_\_\_\_\_

Business Phone \_\_\_\_\_

Location of Signs \_\_\_\_\_

Aldermanic Ward \_\_\_\_\_

Federal Employer ID No./Social Security No. \_\_\_\_\_

Comments \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
**Signature of Applicant**

**Please Return or Fax Application To:**

**THIS IS NOT A BILL**  
**Please do not remit payment**  
**for signs with this application**

**Chicago Department of Transportation**  
**Bureau of Signs & Markings**  
**3458 S. Lawndale**  
**Chicago, Illinois 60623-5008**  
**Phone (312) 747-2220 or 2226**  
**Fax (312) 747-6525**

**Attn: Dennise Witkowski**



**PARKING RESTRICTION SIGN APPLICATION**

DATE: \_\_\_\_\_

REQUESTOR \_\_\_\_\_

ADDRESS \_\_\_\_\_ PHONE NO. ( ) \_\_\_\_\_

BUSINESS NAME \_\_\_\_\_ HRS OF OPERATION \_\_\_\_\_

BUSINESS ADDRESS \_\_\_\_\_ ZIP \_\_\_\_\_

BUSINESS PHONE ( ) \_\_\_\_\_ FAX NO. ( ) \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

EXACT ADDRESS OF INSTALL \_\_\_\_\_

FEIN: \_\_\_\_\_ OR SS# \_\_\_\_\_

TYPE OF BUSINESS \_\_\_\_\_

(circle) NON FOR PROFIT YES OR NO (if yes, attach tax except letter)

**CONDITIONS**

This request is valid for 60 days, if payment is not received within that time frame the ordinance will be repealed. After original cost of signage, you are responsible for yearly maintenance fee. If you move, relocate, and/or change businesses you must notify the City of Chicago.

SIGNATURE \_\_\_\_\_

**FOR OFFICIAL USE ONLY**

**SIGNAGE**

TYPE OF RESTRICTIONS REQUEST	_____	DAYS _____	HRS _____
INSTALL	_____	TRAFFIC SIGNS @ \$100.00/SIGN.....	\$ _____
RELOCATE	_____	TRAFFIC SIGNS @ \$ 50.00/SIGN.....	\$ _____
CHANGING	_____	TRAFFIC SIGNS @ \$ 50.00/SIGN.....	\$ _____

Temporary removal of traffic signs during construction  
REMOVE & REINSTALL \_\_\_\_\_ TRAFFIC SIGNS @ \$100.00/SIGN..... \$ \_\_\_\_\_

PERMIT NO. \_\_\_\_\_

**ANNUAL SURCHARGE**

NUMBER OF FEET OF CURB SPACE (Chargeable) MORE THAN 25 FT @ \$14.00 per FT \$ \_\_\_\_\_

**PARKING METERS**

REMOVE	_____	PARKING METERS @ \$150.00/METER.....	\$ _____
RELOCATE	_____	PARKING METERS @ \$150.00/METER.....	\$ _____

TOTAL: \$ \_\_\_\_\_

T & S # \_\_\_\_\_

WARD \_\_\_\_\_