

CITY COUNCIL  
COMMITTEE ON ZONING, LANDMARKS AND BUILDING STANDARDS

COUNCIL ORDER

RE: Approval of sign over 100 square feet in area or over 24 feet above grade

ORDERED, that the City Council hereby approves the following sign application submitted by:

Applicant\*: South Shore Rehabilitation

(\* The Applicant is the owner of the real property or the business tenant of the real property. Do not list the sign contractor, sign erector, sign company or advertising entity in the above space.)

This Order approves the following sign in accordance with Municipal Code of Chicago Section 13-20-680:

Address of Sign: 2425 E 71st Chicago, IL 60649

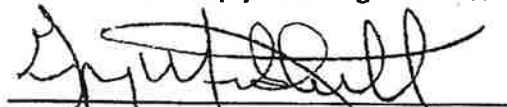
Zoning District: PD 592

DOB Sign Permit Application #: 101033052

Sign Details:

1. On-premise  OR Off-premise
2. Static sign  OR Dynamic-image display sign
3. Number of sign faces 1
4. Projecting over the public way No (Yes or No) If yes, Public Way Use #: \_\_\_\_\_
5. Dimensions: Length 25 feet 0 inches Height 15 feet 0 inches  
Total square feet in area: 375 feet \_\_\_\_\_ inches
6. Height above grade: 47 feet 0 inches
7. Elevation (side of building or lot where the sign will be erected): West
8. Name of Sign Contractor/Erector: Liberty Flag & Banner

To be legal, such sign shall comply with all provisions of Title 17 of the Chicago Municipal Code ("Zoning Ordinance") and all other provisions of the Municipal Code governing the permitting, construction and maintenance and removal of signs and sign structures. Failure of the applicant and the applicant's successors to comply shall be grounds for invalidation or revocation of the sign permit.

  
Alderman

7  
Ward

25' W x 15'



Material Pending  
Banner, Clipped into place behind retainers.  
25.5' x 15.5' (visual opening 25' x 15')



# SOUTH SHORE

## REHABILITATION

### JOB SPECS

Customer: Optima Medical

Job #:

Date: 8-29-23  
Designer: CM

Color Specifications / PMS:

Color match reproduction is NOT guaranteed on CMYK color values

● Project:

Material:

Non-Reflect. ●  
 Reflective ○  
 Specialty ○

### APPROVAL

**CHECKLIST** Initial the appropriate line, sign and return by fax or email.

\_\_\_ Art approved as is \_\_\_ All dimensions are correct  
 \_\_\_ All spelling is correct \_\_\_ Art is approved with noted changes  
 \_\_\_ All colors are correct \_\_\_ Changes noted, provide revision

Customer Approval: \_\_\_\_\_ Date: \_\_\_\_\_  
 Sales Approval: \_\_\_\_\_