



DEPARTMENT OF BUSINESS AFFAIRS AND CONSUMER PROTECTION
CITY OF CHICAGO

Tuesday, January 17, 2017

Dear Mr. Ahern:

Thank you for sending the Employee Discount Card.

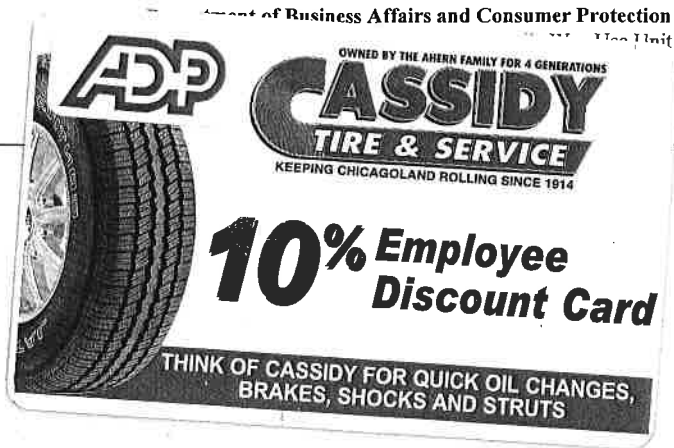
Unfortunately, our department policy does not allow for Business Affairs and Consumer Protection employees to accept gifts for him/herself from clients. Therefore, I am returning your gift. I hope you understand.

Please know that your generosity is much appreciated. We look forward to serving you in the near future.

With warmest thanks,



Tamara L. Harding
Supervisor of Personnel Services
City of Chicago Dept. of Business Affairs and Consumer Protection



WM J CASSIDY TIRE & AUTO
 TOM AHERN
 824 W. DIVERSEY PKWY.
 CHICAGO, IL 60614

12/19/2016

Dear TOM AHERN:

Enclosed are the acceptance materials to authorize your public way privilege for the following:

Account: 89255 - 3
 Location: 824 W. Diversey Pkwy.
 Type of Privilege: Sign
 Permit Term: 5 Year(s)
 Council Passage Date: 12/14/2016

Please follow the simple steps below to ensure your authorization to use the public way occurs without delay:

1. Indicate your acceptance (or denial) of the public way use permit terms by signing the second page of this letter.
2. Remit **\$300.00** as compensation for one (1) year with the enclosed coupon and return envelope. Please do not send cash.
3. The **Certificate of Insurance** must indicate \$1,000,000.00, combined single limit, with said insurance covering all liability, both public liability and property damage, that may result from the granting of said privilege. Please ensure that the insurance liability is **no less** than \$1,000,000.00. The **Certificate of Insurance** must clearly indicate the following: City of Chicago, its agents and employees are listed as additional insured in regards to canopy, awning, balcony, sign, light fixtures, flag pole, vault, sidewalk café, etc. (*Please list YOUR specific public way use, your specific use must be listed or it will not be accepted*). The "Certificate Holder" does not mean that we are listed as additional insured. Please ensure that the statement above is listed on your **Certificate of Insurance**.
4. Return all items named above using the return envelope to:

**CITY OF CHICAGO
 DEPARTMENT OF BUSINESS AFFAIRS AND CONSUMER PROTECTION
 SMALL BUSINESS CENTER - PUBLIC WAY USE UNIT
 CITY HALL - 121 N. LASALLE STREET, ROOM 800
 CHICAGO, IL 60602**

5. Direct any questions to 312-74-GOBIZ / 312-744-6249.

Thank you in advance for your timely submission of your permit information.

A 25% penalty will be added for payments received after due date.

DEPARTMENT OF BUSINESS AFFAIRS AND CONSUMER PROTECTION - Small Business Center - Public Way Use Unit