



Shamrock
BUILDING SERVICES, INC.

September 28, 2020

Karina Ricks
Director of Mobility and Infrastructure
City of Pittsburgh

Dear Ms. Ricks,

Shamrock Building Services, Inc., on behalf of Duolingo Company, is requesting approval to install one (1) 3' x 3' wall projection sign mounted onto a building 18' above sidewalk. Sidewalk at location is 18' wide.

The 3' projection sign meets all city requirements for projection sign zoning ordinance.

Thank you.

Ken Wolfe
Project Manager
Shamrock Building Services, Inc.

WILLIAM PEDUTO
MAYOR



KARINA RICKS
DIRECTOR

CITY OF PITTSBURGH
DEPARTMENT OF MOBILITY & INFRASTRUCTURE
CITY-COUNTY BUILDING

Application for an Encroachment on City Dedicated Right-Of-Way

Date 10-12-2020

Applicant Name Shamrock Building Services c/o
Duoingo

Property Owner's Name (if different from Applicant) ALPHA 4 LP

Address 6019 Grafton Street Pittsburgh PA
15206

Phone Number: 412-567-6602 Alternate Phone Number: 717-368-
2739

Location of Proposed Encroachment: CORNER OF PENN AVE AND SOUTH BEATTY
BUILDING

Ward: 8 Council District: E.LIBERTY Lot and Block 0084B00200-000-
00

What is the properties zoning district code? unc (zoning office 255-2241)

Planning/Zoning Case Number (if applicable) ZDR 2020-07168

Is the existing right-of-way, a street or a sidewalk? sidewalk

Width of Existing Right-of-Way (sidewalk or street): 18' (Before encroachment)

Length of Existing Right-of-Way (sidewalk or street): 117' (Before encroachment)

Width of Proposed Encroachment: 3'

Length of Proposed Encroachment: 4.5"

Number of feet the proposed object will encroach into the ROW: 3'

Description of encroachment: 3'x3' Wall projection sign mounted onto building 18' above sidewalk on
the corner of building

WILLIAM PEDUTO
MAYOR



KARINA RICKS
DIRECTOR

CITY OF PITTSBURGH
DEPARTMENT OF MOBILITY & INFRASTRUCTURE
CITY-COUNTY BUILDING

Reason for application: New city zoning requirement from public works on projection signs and awning from minor obstruction permit to encroachment permits requiring additional approval

APPLICATION CHECKLIST

The following items are necessary in order to process any encroachment. Applications missing documents remain in an incomplete status.

- Letter of request to Karina Ricks, Director of Mobility and Infrastructure
- Property Owners'** Certificate of Insurance – listing the City of Pittsburgh as an additional insured in the amounts listed: Public Liability \$ 100,000.00 - \$ 300,000.00 Property Damage \$ 50,000.00 (must be the Property Owners Insurance)
- Profile picture or drawing with dimensions/specs of the proposed structure to be placed on the site of the encroached property – **STAMPED WITH ZONING APPROVAL**
- Copy of a survey or plot plan of the property
- Documentation from all corresponding utility companies stating approval/easement/agreement
- Application Fee \$250 made payable to Treasurer City of Pittsburgh, if paying by check

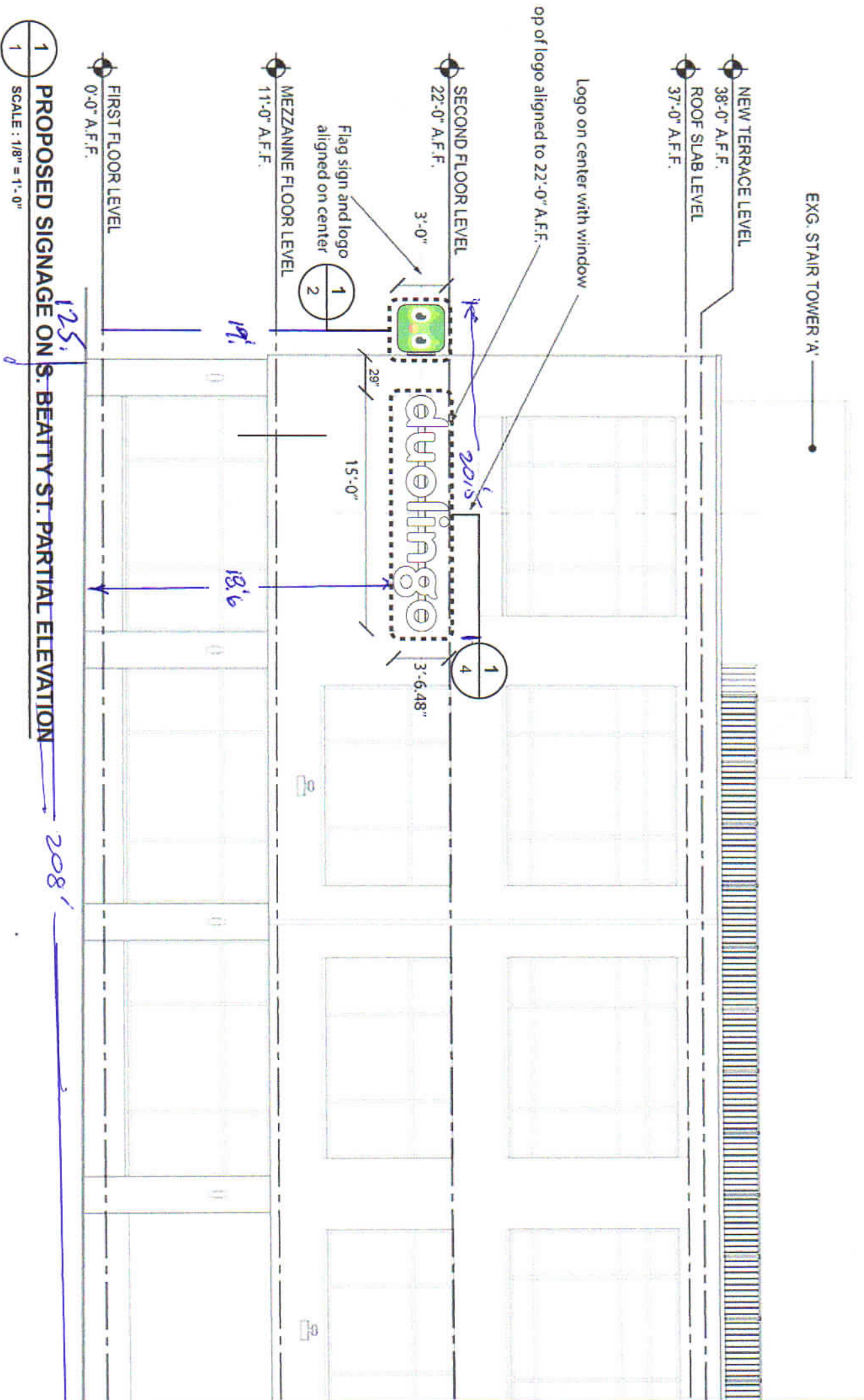
REMEMBER TO ATTACH ALL REQUIRED INFORMATION. (Letter to the Director, Property Owner Insurance forms-listing the City of Pittsburgh as an additional insured, maps, specs ,zoning approved drawings, utility approval documentation, application fee of \$250.00)

For Office Use:

Check for \$250.00 Check # _____ Received Plot Plan or Survey _____

Received Required Insurance _____ Received detailed map of proposed encroachment _____

REV.#	DATE	DESCRIPTION
0	06-10-2020	Original Drawing Completion



1
1
SCALE : 1/8" = 1'-0"

1
1
PROPOSED SIGNAGE ON S. BEATTY ST. PARTIAL ELEVATION

FIELD SURVEY REQUIRED

Date Completed _____ Signature _____

Signature _____ Date _____

PAGE MUST BE PRINTED ON 11" x 17" PAPER FOR SCALE TO BE ACCURATE

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Image capture: Jul 2019 © 2020 Google

Pittsburgh, Pennsylvania



Street View



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
09/23/2020

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER TJS Insurance Group 1301 Grandview Avenue, Suite 400 Pittsburgh, PA 15211	CONTACT NAME: Laura Walkauskas PHONE (A/C No., Ext): (412) 395-4000 E-MAIL ADDRESS: lwalkauskas@tjsins.com	FAX (A/C No.): (412) 381-9368
	INSURER(S) AFFORDING COVERAGE	
INSURED Duolingo, Inc. 5900 Penn Avenue Pittsburgh PA 15206	INSURER A: Federal Insurance Company NAIC #: 20281	
	INSURER B: Chubb Indemnity Insurance Company NAIC #: 12777	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

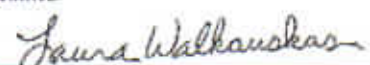
COVERAGES **CERTIFICATE NUMBER:** CL1910116470 **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			3592-57-76	10/01/2019	10/01/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY			(19) 7357-17-69	10/01/2019	10/01/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			7988-91-23	10/01/2019	10/01/2020	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below		N/A	(20) 7174-73-16	10/01/2019	10/01/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
A	PROPERTY COVERAGE Deductible \$1,000			3592-57-76	10/01/2019	10/01/2020	Business Personal Prop. \$2,000,000 Tenants Improvements & Betterments \$1,900,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

City of Pittsburgh is included as an Additional Insured on General Liability. Coverage is written on Primary and Non Contributory basis. Waiver of Subrogation applies.

CERTIFICATE HOLDER City of Pittsburgh 414 Grant Street Pittsburgh PA 15219	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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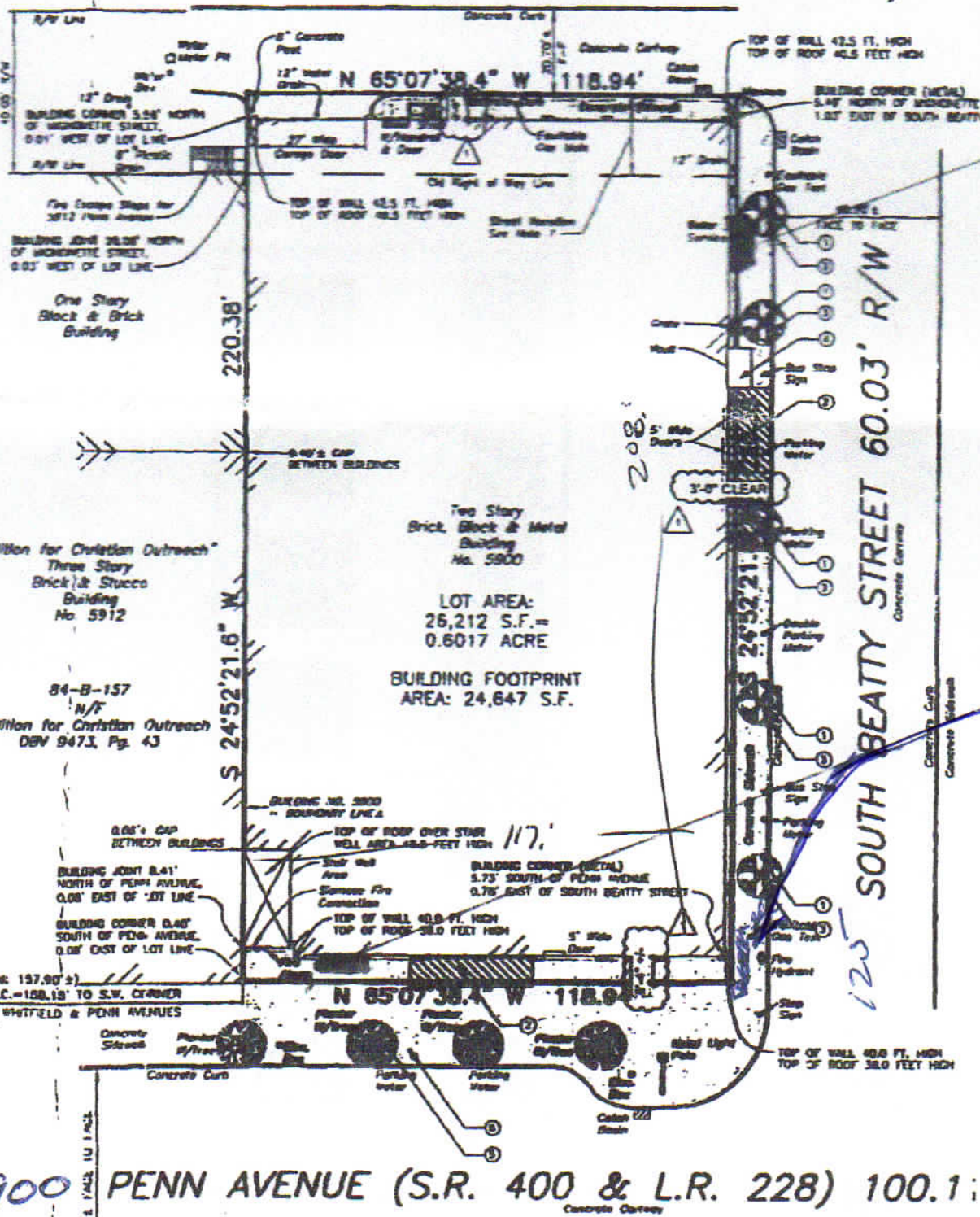
2-17-16

APPROVED BY ZONING
BY: *[Signature]*
CITY OF PITTSBURGH
DEPARTMENT OF CITY PLANNING

16-SGN-10023

STREET TREES NOT YET APPROVED -
KR
12-1-15

MIGNONETTE STREET 20.025' R/W



REV	DESCRIPTION	DATE	APPROVED
1	CODE REVISIONS	11/20/15	

NOTE:
ALL MEP WORK INCLUDING MECHANICAL, PLUMBING, ELECTRICAL, SPRINKLER, FIRE ALARM, TELEPHONE, DATA, ETC IS CONSIDERED DESIGN / BUILD BY THE GENERAL CONTRACTOR. GC SHALL PROVIDE ENGINEERED DRAWINGS FOR ALL OF THESE TRADES. GC SHALL BE RESPONSIBLE FOR PROVIDING COMPLETE SYSTEMS. GC SHALL BE RESPONSIBLE FOR PROVIDING ALL PERMITS.

- KEYNOTES:**
- INSTALL NEW STREET TREE - REFER TO CITY OF PITTSBURGH FORESTRY DOCUMENTS FOR TREE SPECIES AND CALIBER.
 - REMOVE PORTION OF EXISTING CONCRETE SIDEWALK SLAB AT NEW DOOR ENTRANCES. REPAIR NEW SLABS AS REQUIRED TO PROVIDE ADA COMPLIANT ENTRANCES. (TYPICAL AT ALL WALLS)
 - INSTALL NEW 2'-4" x 10'-0" MINIMUM PLANKING STYP PER CITY OF PITTSBURGH FORESTRY DEPARTMENT SPECIFICATIONS. (TYPICAL)
 - REPAIR EXISTING CONCRETE ELECTRICAL SIDEWALK WALL. COORDINATE ALL WORK WITH ELECTRICAL COMPANY DETAILS AND SPECIFICATIONS.
 - REMOVE STREET TREES REMAIN
 - REMOVE ALL DAMAGED PORTIONS OF EXISTING CONCRETE SIDEWALK SLAB AND REPLACE WITH 12" x 12" x 4" CONCRETE SIDEWALK SLAB. (TYPICAL)

SITE LOCATION PLAN



PROPOSED RENOVATIONS TO EXISTING BUILDING:
5900 PENN AVENUE
EAST LIBERTY | PITTSBURGH | PENNSYLVANIA 15206

MORGAN ARCHITECTURE + DESIGN
1728 SARAH ST. PITTSBURGH, PA 15206 412.784.7763 MORGANARCHITECTURE.COM

11/1/15
PRELIMINARY
ISSUED FOR PERMIT

**SITE PLAN
A-0.1**

©2015 MORGAN ARCHITECTURE + DESIGN

5900 PENN AVENUE (S.R. 400 & L.R. 228) 100.1'

1 SITE PLAN
A-0.1 Scale: 1" = 20'

WILLIAM PEDUTO
MAYOR



KARINA RICKS
DIRECTOR

CITY OF PITTSBURGH
DEPARTMENT OF MOBILITY & INFRASTRUCTURE
CITY-COUNTY BUILDING

Received Utility Letters _____

Utility Contact Info for Approval

Received drawing or picture of completed project _____

Received picture of proposed encroached property _____

All tax information in compliance _____ delinquent _____

PEOPLES GAS

261 Center Street

McKeesport, PA 15132

Contact: Don Zombek

Don.zombek@peoples-gas.com

COLUMBIA GAS

251 W. Maiden Street

Washington, Pa 15301

Contact: Grace Bachism

gbachism@nisource.com

VERIZON

15 E. Montgomery Ave

Pittsburgh, Pa 15212

Contact: Office Personnel

PENNSYLVANIA AMERICAN WATER

560 Horning Rd

Bethel Park, PA 15102

Contact: Joe Tewell

paonecallwestern@amwater.com

PWSA

<https://www.pgh2o.com/developers-contractors-vendors/permits/domi-approvals>

WILLIAM PEDUTO
MAYOR



KARINA RICKS
DIRECTOR

CITY OF PITTSBURGH
DEPARTMENT OF MOBILITY & INFRASTRUCTURE
CITY-COUNTY BUILDING

DUQUESNE LIGHT COMPANY

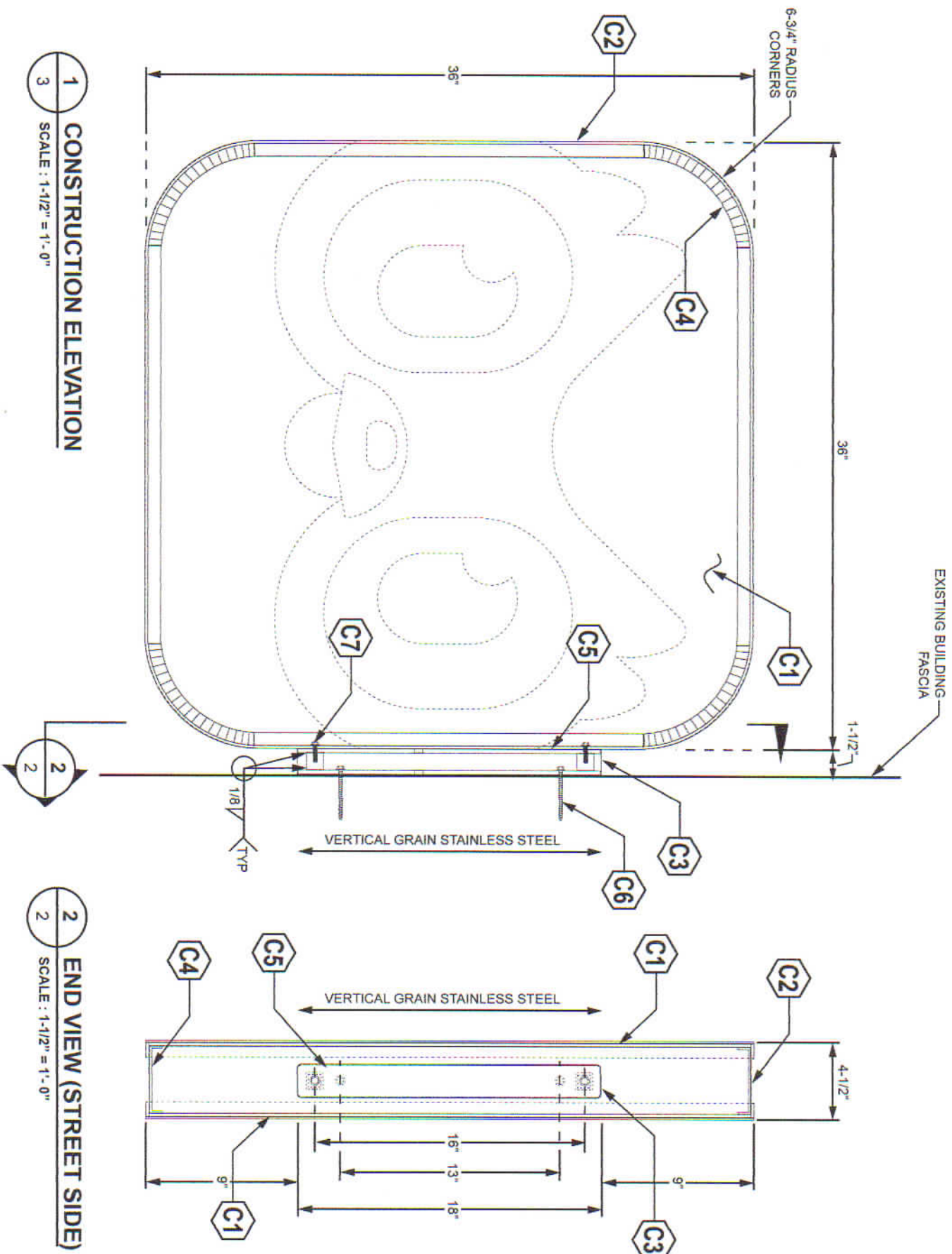
2645 New Beaver Avenue

Pittsburgh, Pa 15233

Contact: John Andzelik

jandzelik@duqlight.com

REV #	DATE	DESCRIPTION
0	06-10-2020	Original Drawing Completion



ITEM	DESCRIPTION	SPECIFICATION
C1	Sign Graphic Face with Trim Cap	0.177" Translucent White Optix LD 7328 Acrylic with Full Color Digitally Printed Graphic to Match Corporate Colors with Protective Luster Over-laminate and 1" Jewellee Chrome Trim Cap
C2	Internally Illuminated, Double Faced Custom Fabricated Sign Cabinet	22 GA. Stainless Steel Cabinet Returns with Vertical Grain Brushed Finish, Sign Poster Box 3 LED Light Modules and 24 VDC Power Supply (NOT SHOWN FOR CLARITY)
C3	Custom Fabricated Pylon Mount	22 GA. Stainless Steel Pylon Return Skin
C4	Kerf-Cut and Welded Aluminum Channel Internal Frame	4" x 3/4" x 1/8" Aluminum Extrusion Channel Frame
C5	Concealed Mounting Plate Structure	TWO (2) 2" x 18" x 1/4" Thick Aluminum Plates Joined by TWO (2) 1" x 1" x 1/8" Square Aluminum Tubes
C6	Building Attachment Hardware	TWO (2) 1/4" DIA. x 3" Long Tapcon Self Drilling Screws
C7	Sign Cabinet to Concealed Mounting Plate Structure Hardware	TWO (2) 1/4"-20 x 1" Long Hex Head Screws with Washers (with Imbedded Nuts)

1 CONSTRUCTION ELEVATION
SCALE : 1-1/2" = 1'-0"

2 END VIEW (STREET SIDE)
SCALE : 1-1/2" = 1'-0"

FIELD SURVEY REQUIRED

Date Completed _____ Signature _____

Signature _____ Date _____

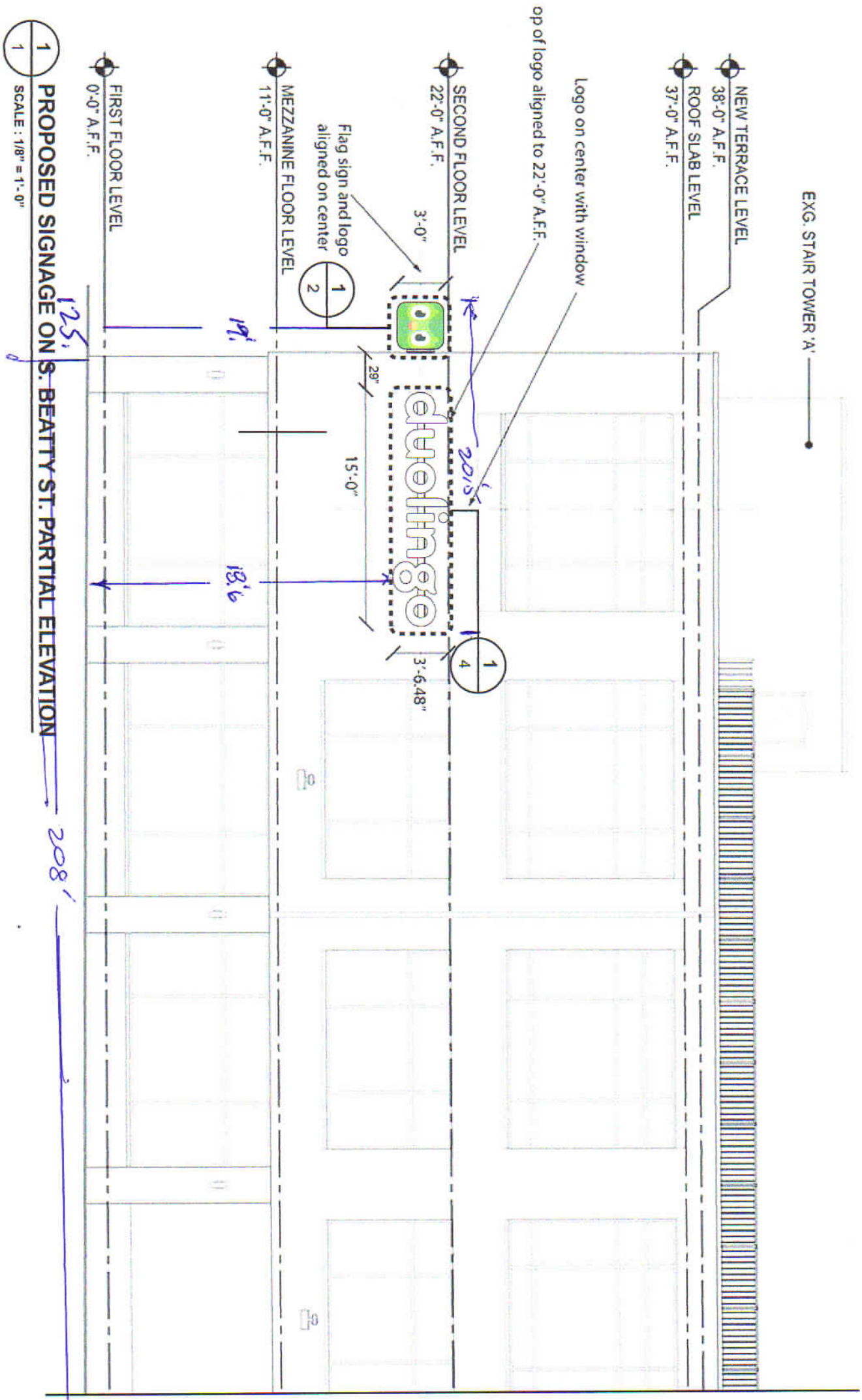
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REV.#	DATE	DESCRIPTION
0	06-10-2020	Original Drawing Completion



1 PROPOSED SIGNAGE ON S. BEATTY ST. PARTIAL ELEVATION

SCALE : 1/8" = 1'-0"

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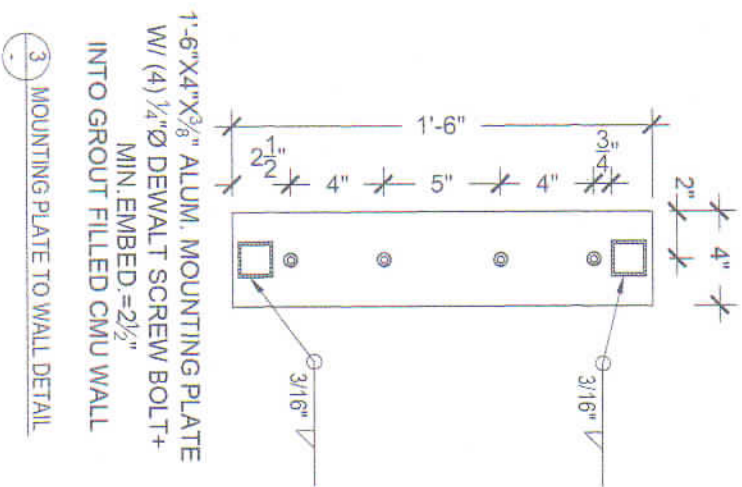
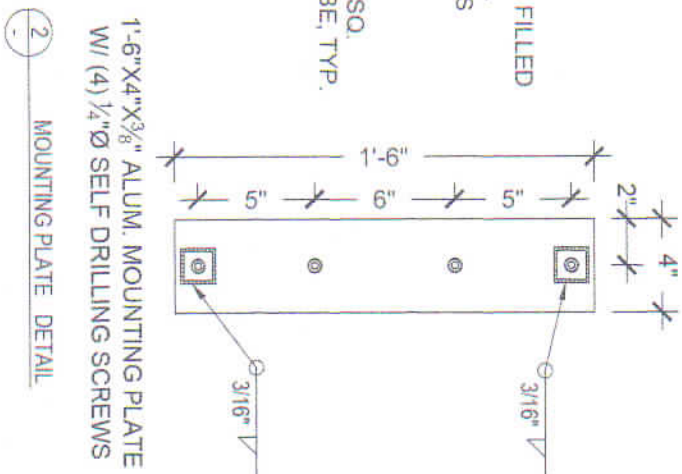
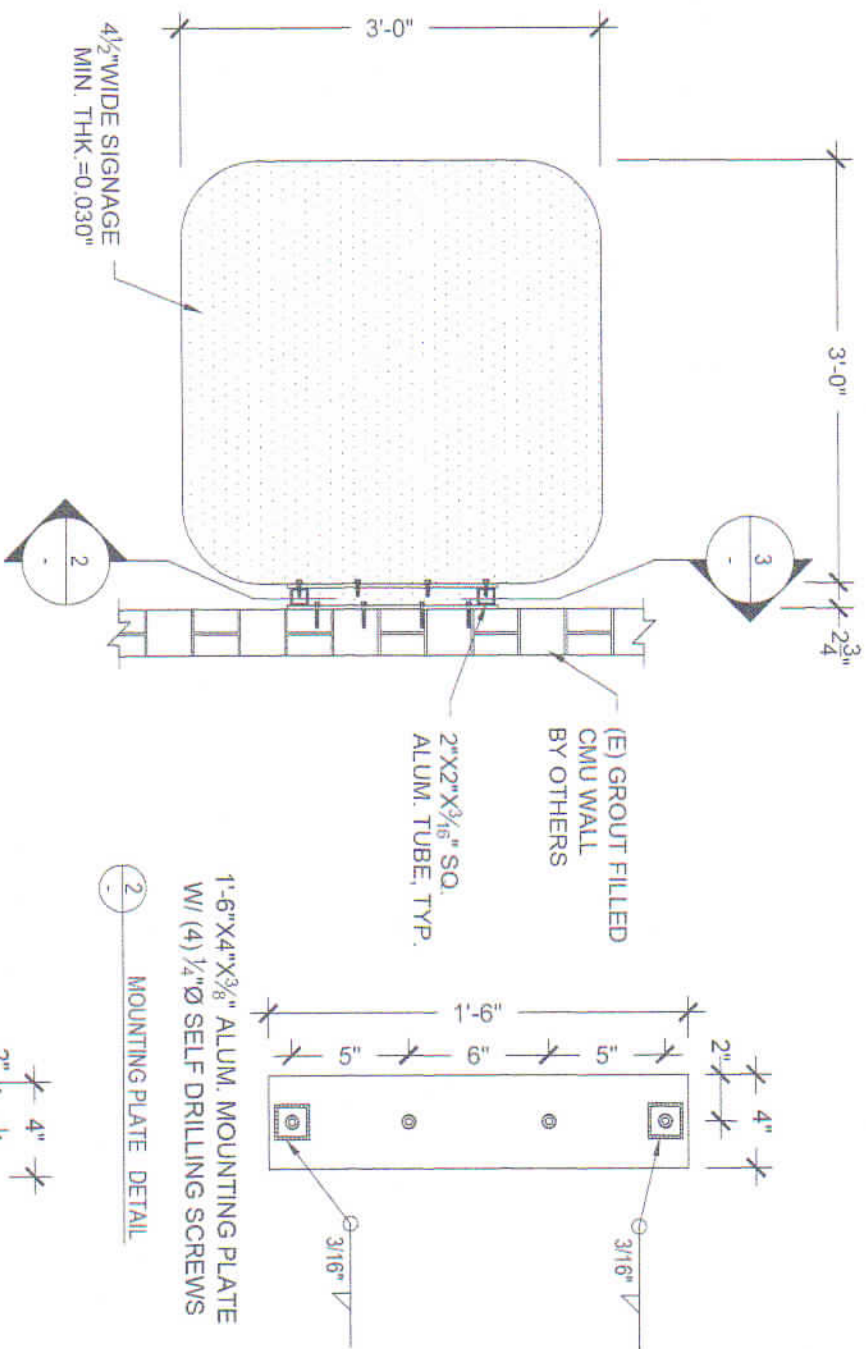




10815 RANCHO BERNARDO RD., SUITE 260
 SAN DIEGO, CA 92198
 PROJECTMANAGER@SULLAWAYENG.COM
 PHONE: 1-858-312-5150 FAX: 1-858-777-3534

PROJECT: DUOLINGO, SIGN TYPE: GRAPHIC LOGO SIGN, 5900 PENN AVENUE, PITTSBURGH, PA
 PROJECT #: 26687A
 CLIENT: SHAMROCK BUILDING SERVICES

DATE: 07/08/2020
 ENGINEER: JC
 LAST REVISED:



1 ELEVATION - MAX OAH FROM GRADE: 18'-9"



- GENERAL NOTES
1. DESIGN CODE: IBC 2018
 2. DESIGN LOADS: ASCE 7-16
 3. WIND VELOCITY 110 MPH EXPOSURE C
 4. GROUND SNOW LOAD = 30PSF
 5. ALUMINUM ELEMENTS 6061-T6
 6. SELF DRILLING SCREWS PER ICC ESR 1976 SPECIFICATIONS OR EQUIVALENT
 7. DEWALT SCREW BOLTS + PER ICC ESR 4042
 8. THE CMU BLOCK SHALL CONFORM TO ASTM C90.
 WITH STRENGTH $f_m = 1500$ PSI MIN AND MUST COMPLY WITH CHAPTER 21 OF IBC
 MORTAR SHALL COMPLY TO SECTION 2103.2.1 OF IBC 2018
 9. AND MUST BE TYPE N, S OR M
 10. GROUT SHALL COMPLY TO SECTION 2103.3 OF IBC 2018
 11. PROVIDE PROTECTION AGAINST DISSIMILAR METALS
 12. ALL DIMENSIONS TO BE VERIFIED PRIOR TO FABRICATION
 13. ALL EXISTING ELEMENTS AND DIMENSIONS TO BE VERIFIED IN FIELD



SHAMBUI-02

ABUCZYNSKI

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/11/2019

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER License # 60236 HDH Group Inc 210 Sixth Avenue, 30th Floor Pittsburgh, PA 15222	CONTACT NAME: Andrea Buczynski PHONE (A/C, No, Ext): FAX (A/C, No): E-MAIL ADDRESS: andrea.buczynski@hubinternational.com														
INSURED SHAMROCK BUILDING SERVICES INC P.O. Box 16223 Pittsburgh, PA 15242	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A : The Continental Insurance Company</td> <td>35289</td> </tr> <tr> <td>INSURER B : Valley Forge Insurance Company</td> <td>20508</td> </tr> <tr> <td>INSURER C : Continental Casualty Company</td> <td>20443</td> </tr> <tr> <td>INSURER D : American Interstate Insurance Company</td> <td>31895</td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </tbody> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : The Continental Insurance Company	35289	INSURER B : Valley Forge Insurance Company	20508	INSURER C : Continental Casualty Company	20443	INSURER D : American Interstate Insurance Company	31895	INSURER E :		INSURER F :	
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COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

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INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A X	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE X OCCUR	X	4013235396	12/3/2019	12/3/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 15,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/POP AGG \$ 2,000,000
B X	AUTOMOBILE LIABILITY ANY AUTO OWNED AUTOS ONLY SCHEDULED AUTOS HIRED AUTOS ONLY NON-OWNED AUTOS ONLY		4013235382	12/3/2019	12/3/2020	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
C X	UMBRELLA LIAB X OCCUR EXCESS LIAB CLAIMS-MADE		4013235379	12/3/2019	12/3/2020	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N N/A	AVWCPA2850722020	1/1/2020	1/1/2021	X PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

CERTIFICATE HOLDER City of Pittsburgh Attn: Public Works Dept. 611 Second Ave. Pittsburgh, PA 15219	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>Anthony J. Horis</i>
--	---