

Michael Milligan - ADM Signs

3414 Charlotte Street, Pittsburgh, PA 15201

February, 26 2020

Ms. Karina Ricks
Director / Department Of Mobility and Infrastructure
611 Second Avenue, Pittsburgh PA 15219

Greetings Ms. Ricks,

I am contact you in regards to an encroachment decision as part of a sign permit application with the City Of Pittsburgh's Zoning and Permits License And Inspections departments. The proposed new projecting sign extends 48" from the store front fascia over an existing public side walk. Stamped engineers drawings and site plan accompany this letter as well all other required documents. Please review and advise.

Regards,
Michael Milligan
Project Manager - ADM Signs
412-621-2211



CITY OF PITTSBURGH

Department of Mobility and Infrastructure

William Peduto, Mayor

Karina Ricks, Director

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

Date 02-26-20

Applicant Name ADM Signs

Property Owner's Name (if different from Applicant) 1505 E. Carson Street LP.

Address 130 7TH ST STE 300, PITTSBURGH, PA 15222-3409

Phone Number: 412. 688. 7200 Alternate Phone Number: _____

Location of Proposed Encroachment: 1505 E. Carson Street, Pittsburgh, PA.

Ward: 117-17th Council District: _____ Lot and Block _____

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

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

Width of Existing Right-of-Way (sidewalk or street): 14' (Before encroachment)

Length of Existing Right-of-Way (sidewalk or street): 177' (Before encroachment)

Width of Proposed Encroachment: 4'

Length of Proposed Encroachment: 12"

Reason for application: Proposed new sign projecting from store front fascia 48" over existing side walk. Encroachment decision required for sign permit application for PLI.

*****PLEASE ATTACH ALL ADDITIONAL INFORMATION *****



CITY OF PITTSBURGH

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APPLICANT CHECKLIST

Letter to the Director

Property Owners' Certificate of Insurance – listing the City of Pittsburgh as an additional insured

Profile picture or drawing with dimensions of the proposed structure to be placed on the site of the encroached property (No Larger than 8" X 11")

Copy of the specifications (No Larger than 8" X 11")

Copy of a survey or plot plan of the property

Documentation from utility companies stating approval/easement/agreement

Application Fee \$150 made payable to Treasurer City of Pittsburgh

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, drawings, utility documentation, a check for \$150.00)

For Office Use:

Check for \$150.00 Check # 3119 Received Plot Plan or Survey

Received Required Insurance Received detailed map of proposed encroachment

Received Utility Letters N/A

Received drawing or picture of completed project

Received picture of proposed encroached property

All tax information in compliance delinquent



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
03/03/2020

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 Willis Towers Watson Northeast, Inc. fka Willis of Pennsylvania, Inc. c/o 26 Century Blvd P.O. Box 305191 Nashville, TN 372305191 USA	CONTACT NAME: Willis Towers Watson Certificate Center PHONE (A/C, No, Ext): 1-877-945-7378 FAX (A/C, No): 1-888-467-2378 E-MAIL ADDRESS: certificates@willis.com	
	INSURER(S) AFFORDING COVERAGE INSURER A: Philadelphia Indemnity Insurance Company INSURER B: BrickStreet Mutual Insurance Company INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 18058 12372


COVERAGES **CERTIFICATE NUMBER:** W15646820 **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 type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input checked="" type="checkbox"/> LOC OTHER:	Y	Y	PHPK2039388	09/30/2019	09/30/2020	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 10,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY	Y		PHPK2039388	09/30/2019	09/30/2020	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 <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTIONS 0			PHUB694039	09/30/2019	09/30/2020	EACH OCCURRENCE \$ 10,000,000 AGGREGATE \$ 10,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	WCN6003109	09/24/2019	09/24/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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)
This Voids and Replaces Previously Issued Certificate Dated 03/02/2020 WITH ID: W15630444.

City of Pittsburgh is named as additional insured with respect to General Liability and Automobile Liability policies. Waiver of Subrogation applies in favor of Additional Insureds with respects to General Liability. The Umbrella/Excess policy Follows Form.

CERTIFICATE HOLDER City of Pittsburgh 414 Grant St. 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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For Office Use:

Check for \$150.00 Check # _____ Received Plot Plan or Survey _____

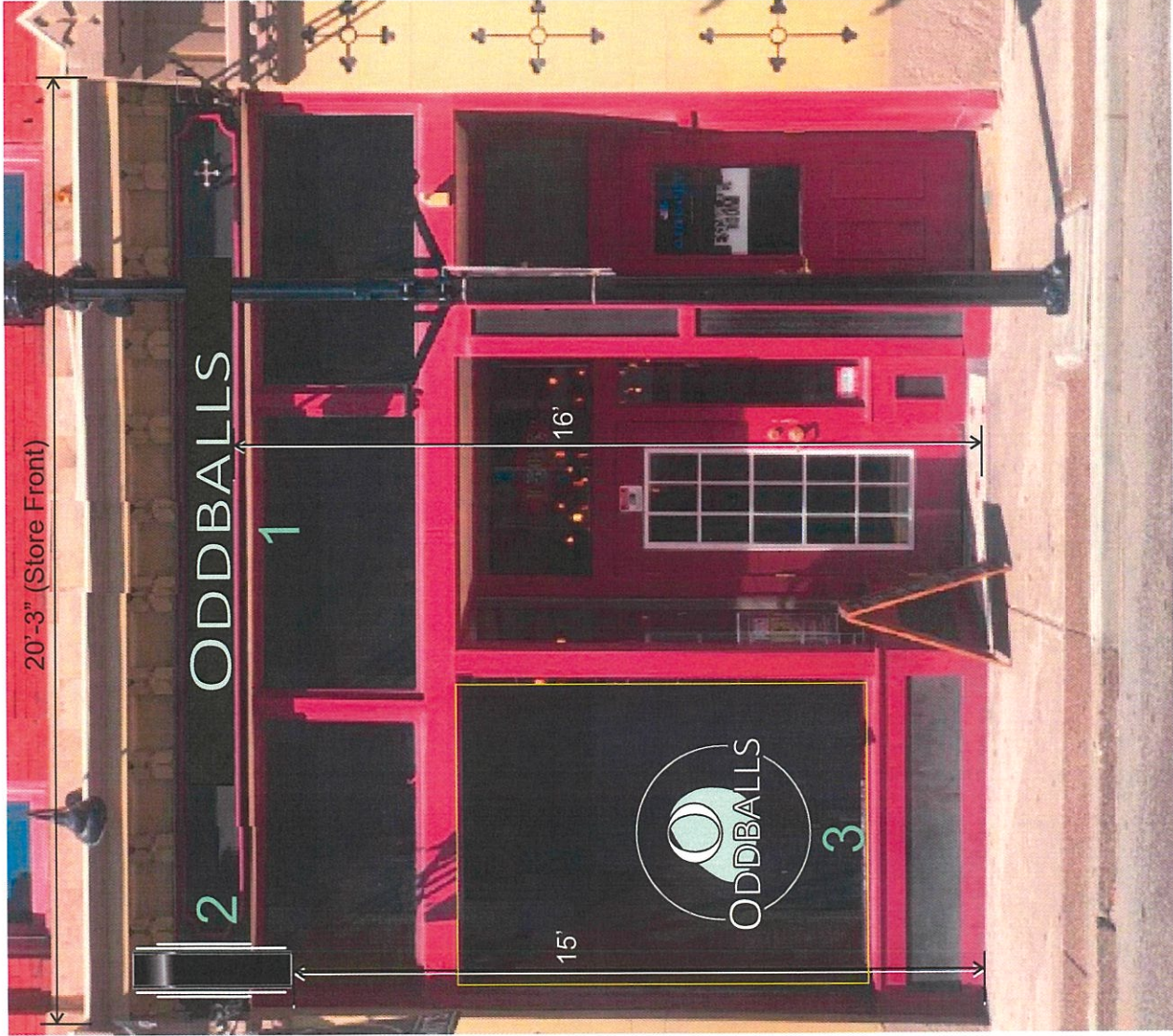
Received Required Insurance _____ Received detailed map of proposed encroachment _____

Received Utility Letters _____

Received drawing or picture of completed project _____

Received picture of proposed encroached property _____

All tax information in compliance _____ delinquent _____



FRONT ELEVATION - Sign Type (1)(QTY:1)
 Dibond Aluminum Panel w/Vinyl Graphic
 Scale: Proportional (9.1 SQFT)

FRONT ELEVATION - Sign Type (2)(QTY:1)
 D/F Exposed Neon Sign - Projecting Mount
 Scale: Proportional (9 SQFT)

FRONT ELEVATION - Sign Type (3)(QTY:1)
 Vinyl Graphic - Applied First Surface
 Scale: Proportional (25% Of Glazing - 10.2 SQFT)

ODDBALLS - 1505 E Carson St, Pittsburgh, PA 15203

CUSTOMER APPROVAL

DATE: 02-12-20

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 Any duplication of this drawing or any of its components without written permission is prohibited.

SHEET SIZE (8.5 x 11)

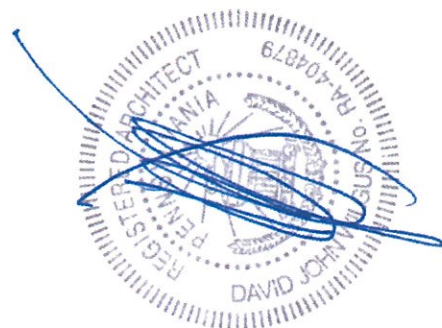
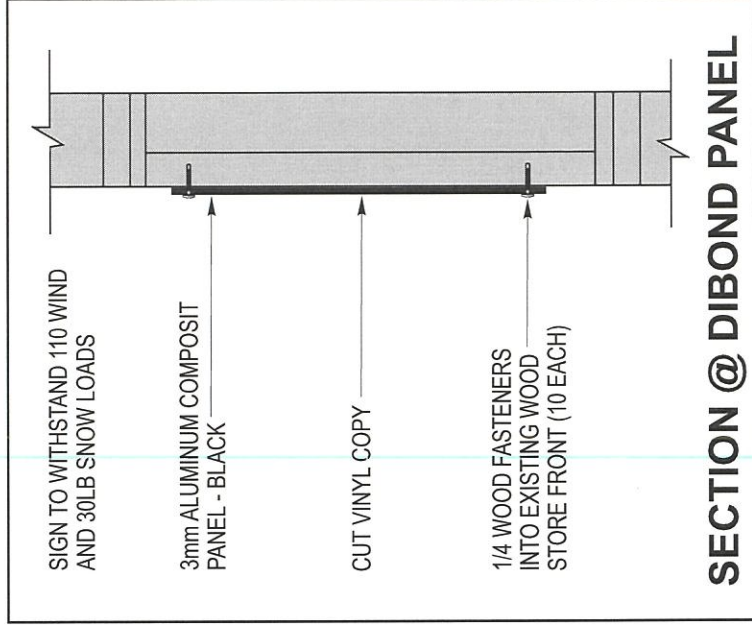
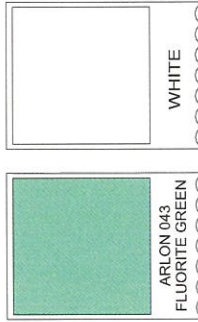
004_ODDBALLS

120"



11"

FRONT ELEVATION - Sign Type (1)(QTY:1)
Dibond Aluminum Panel w/Vinyl Graphic
Scale: 3/4" = 1' (9.1 SQFT)



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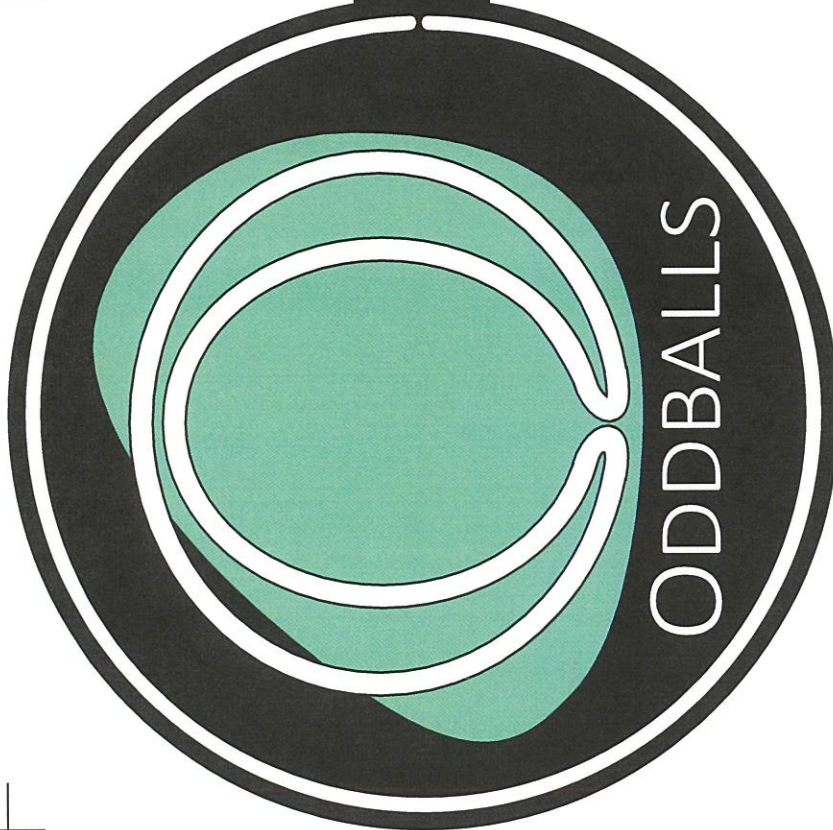
SHEET SIZE (8.5 x 11)

004_ODDBALLS

36"

12"

36"



FRONT ELEVATION - Sign Type (2)(QTY:1)
 D/F Exposed Neon Sign - Projecting Mount
 Scale: 1.5" = 1' (9 SQFT)



ODDBALLS - 1505 E Carson St, Pittsburgh, PA 15203

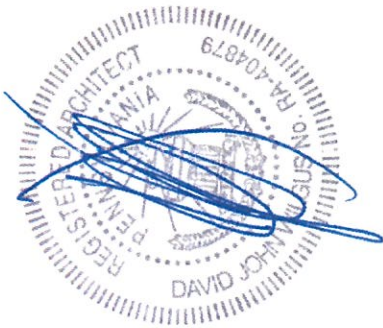
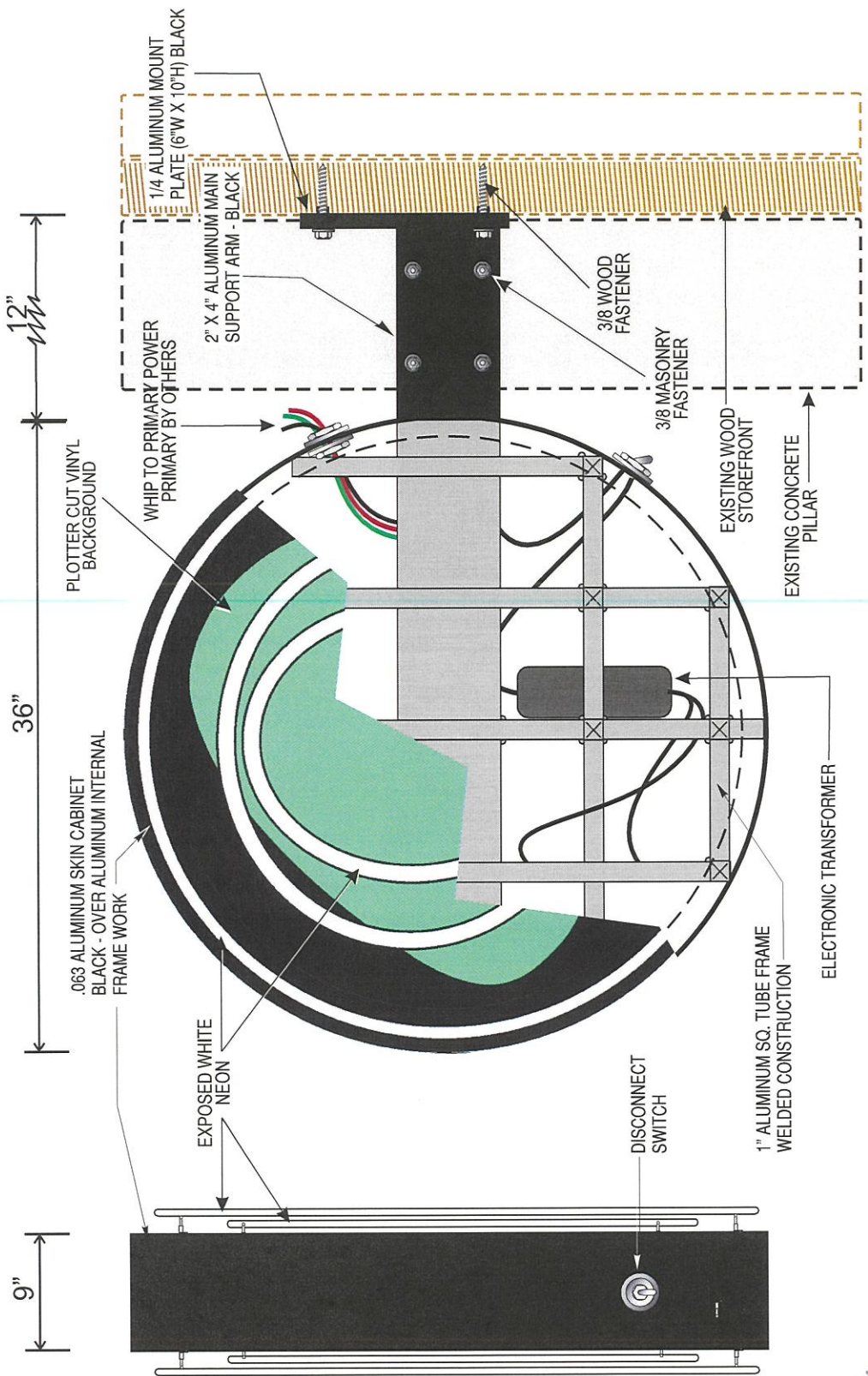
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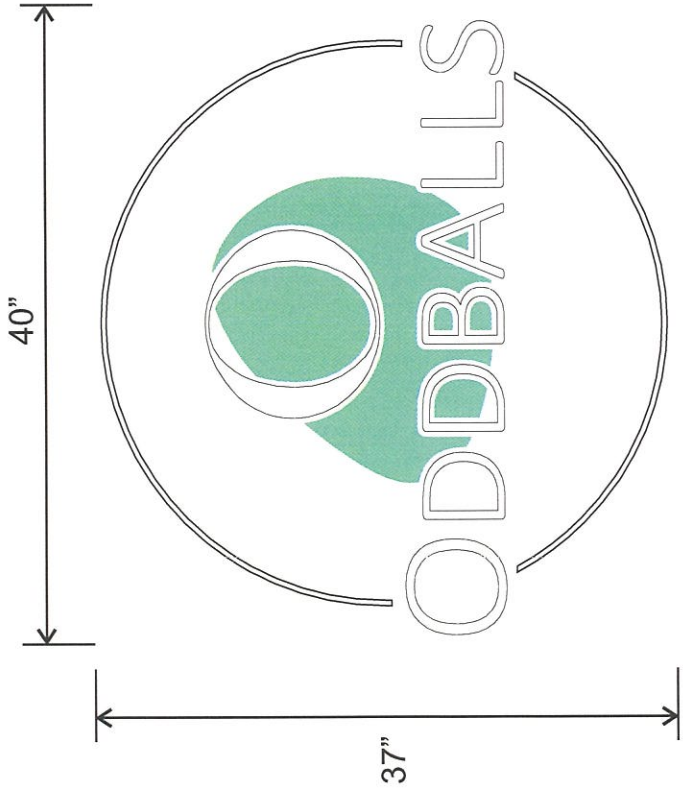
004_ODDBALLS



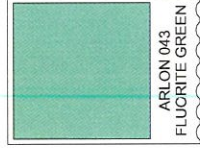
FRONT ELEVATION - Sign Type (2)(QTY:1)
 D/F Exposed Neon Sign - Projecting Mount
 Scale: 1.5" = 1' (9 SQFT)
 SIGN TO WITHSTAND 110 MPH AND
 30LB SNOW LOADS



ODDBALLS - 1505 E Carson St, Pittsburgh, PA 15203	CUSTOMER APPROVAL	DATE: 02-12-20
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ADMSIGNS www.admsigns.com		
3414 Charlotte Street • Pittsburgh, PA 15201 • 412.621.2211		



FRONT ELEVATION - Sign Type (3)(QTY:1)
 Vinyl Graphic - Applied First Surface
 Scale: 1" = 1' (25% Of Glazing - 10.2 SQFT)



ODDBALLS - 1505 E Carson St, Pittsburgh, PA 15203

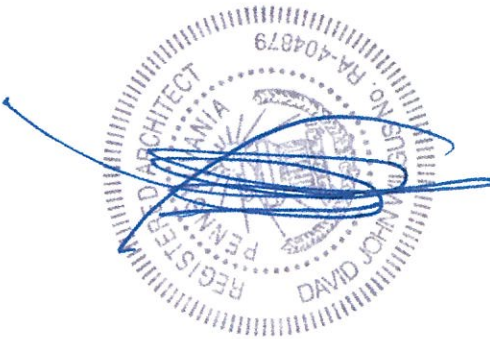
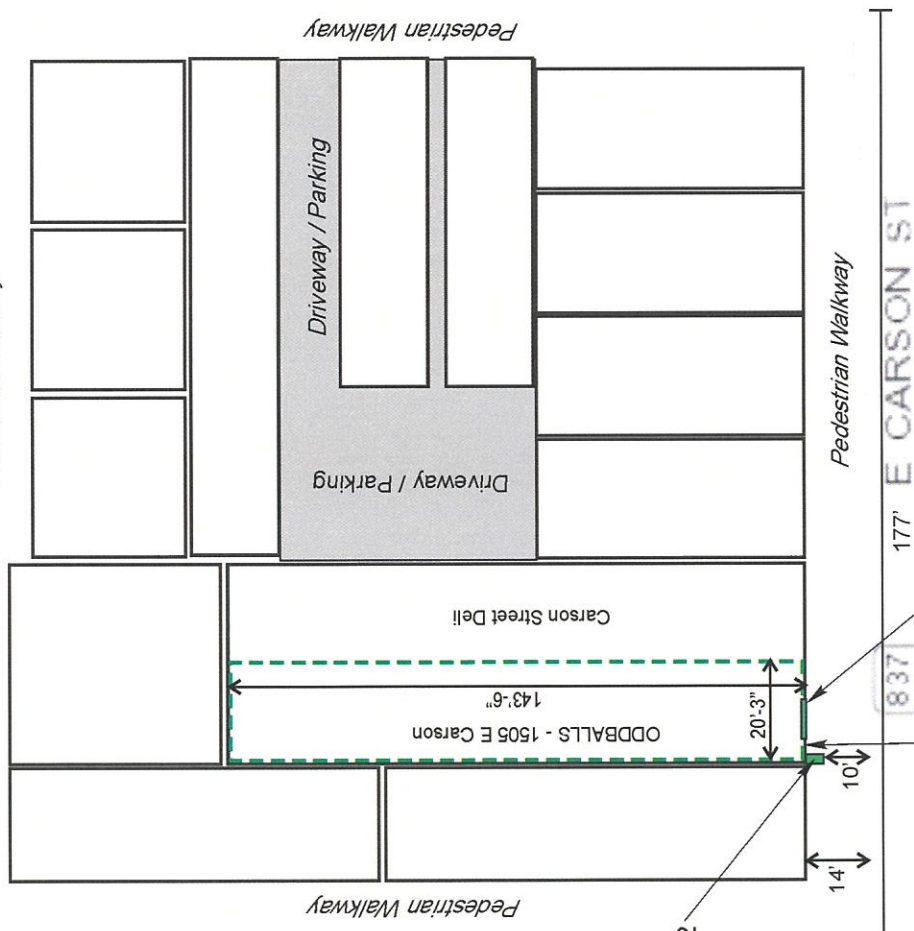
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SHEET SIZE (8.5 x 11)

003_ODDBALLS



SITE MAP

PROPOSED SIGN - 2

PROPOSED SIGN - 1

PROPOSED SIGN - 3

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003_ODDBALLS