



# CITY OF PITTSBURGH

## *Department of Mobility and Infrastructure*

*William Peduto, Mayor*

*Karina Ricks, Director*

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

*Before application can be filed, anyone affiliated with this application must submit a tax & fine clearance statement. This statement must be signed off by all listed in the attached Ordinance. This information request is from City Code 416.03C. (see page 3)*

Date May 31, 2019

Name Pedantic LLC, Henry Simonds

Address 601 Saint James Street, Pittsburgh, PA 15232

Home Phone Number: \_\_\_\_\_ Business Phone Number: \_\_\_\_\_

Pager Number: \_\_\_\_\_ Cell Phone Number: 412-683-0705

Location of Proposed Encroachment: consolidated properties 5226 and 5230 Penn Avenue  
108

Ward: 8th Ward Council District: \_\_\_\_\_

Lot and Block What is the properties zoning code? (zoning office 255-2235) 50-R-285, 50-R-284

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

Width of Existing Right-of-Way (sidewalk or street): 12'-1" +/- (Before encroachment)

Length of Existing Right-of-Way (sidewalk or street): 80'-0" +/- (Before encroachment)

Width of Proposed Encroachment: entrance stoop and ramp 3'-4" width, canopy above 3'-4" width

Length of Proposed Encroachment: entrance stoop and ramp 27'-3" length, canopy above 72'-7" length

Reason for application: Similar to other businesses on Penn Avenue, we will replace existing entrance steps with an entrance stoop and ramp. They are needed to create an accessible entrance with the existing floor level.

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



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Upon completion of the building, how many people will the structure accommodate? 0

As a result of this encroachment, will the project create jobs and if so how many? 0

I have enclosed a picture or drawing of the proposed structure to be placed on the site of the encroached property. (No Larger than 8" X 11")

If there are abutting property owners, I have enclosed the petition (attached at the end of the application) received at the time of the application containing signatures of all adjacent property owners.

This petition has been witnessed and notarized.

I have enclosed a copy of the specifications. (No Larger than 8" X 11")

I have enclosed a copy of a survey or plot plan of the property.

REMEMBER TO ATTACH ALL ADDITIONAL INFORMATION. (ie.: Letter to the

Director, Insurance forms (these are due when the encroachment is approved), maps, specs, drawings, petitions, a check for \$150.00 payable to Treasurer City of Pittsburgh).

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### For Office Use:

Check for \$150.00 #3129 Received Plot Plan or Survey ✓

Received Required Insurance ✓ Petition signed and notarized N/A

Received detailed map of proposed encroachment ✓

Received drawing or picture of completed project ✓

Received picture of proposed encroached property ✓

Received signed, notarized Petition, if there are abutting property owners N/A

All tax information in compliance ✓ delinquent

Karina Ricks, Director  
Department of Mobility & Infrastructure  
611 Second Avenue  
Pittsburgh, PA 15219

5/31/2019

Dear Ms. Ricks,

Please review the attached encroachment permit application for the entrance stoop and ramp to make an accessible entrance to the existing first floor level of the consolidated properties of 5226 and 5230 Penn Avenue. Also proposed is a canopy that will protect this entrance from weather and serve as a welcoming architectural feature. The steel canopy has a rectangular profile and would be approximately 9'-6" to 11'-2" above the existing sloping sidewalk. The canopy and the new entrance stoop would encroach onto the sidewalk by 3'-4".

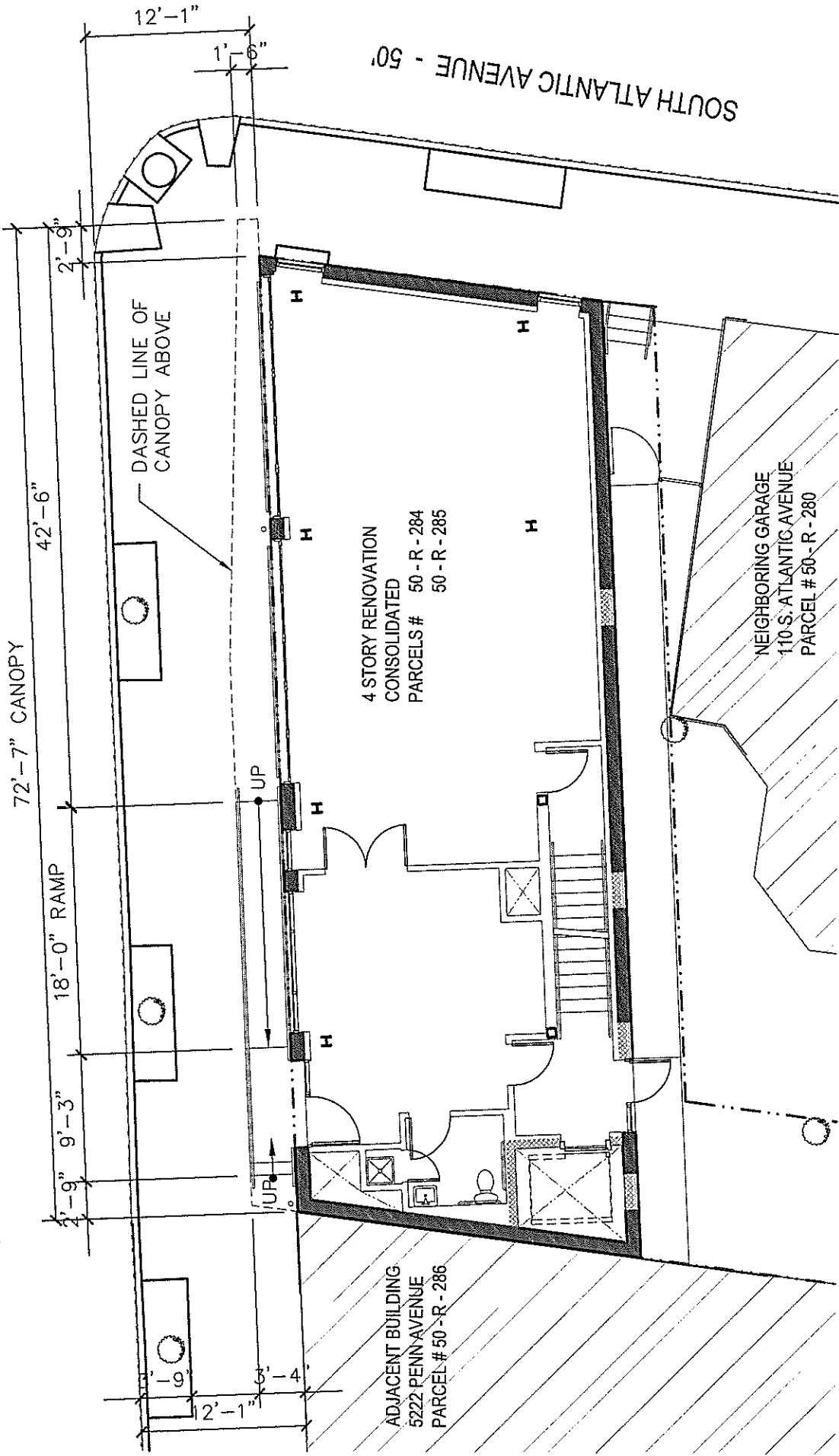
The check will be hand-delivered to Jennifer Massacci. Please let me know if you have any questions or require anything further. Thank you for your time and consideration.

Sincerely,



David Teufel, RA, LEED AP  
Moss Architects LLC

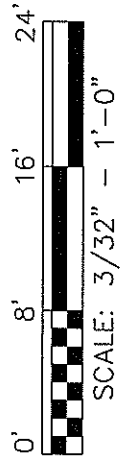
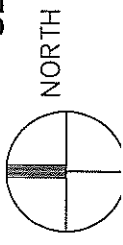
PENN AVENUE - 60'

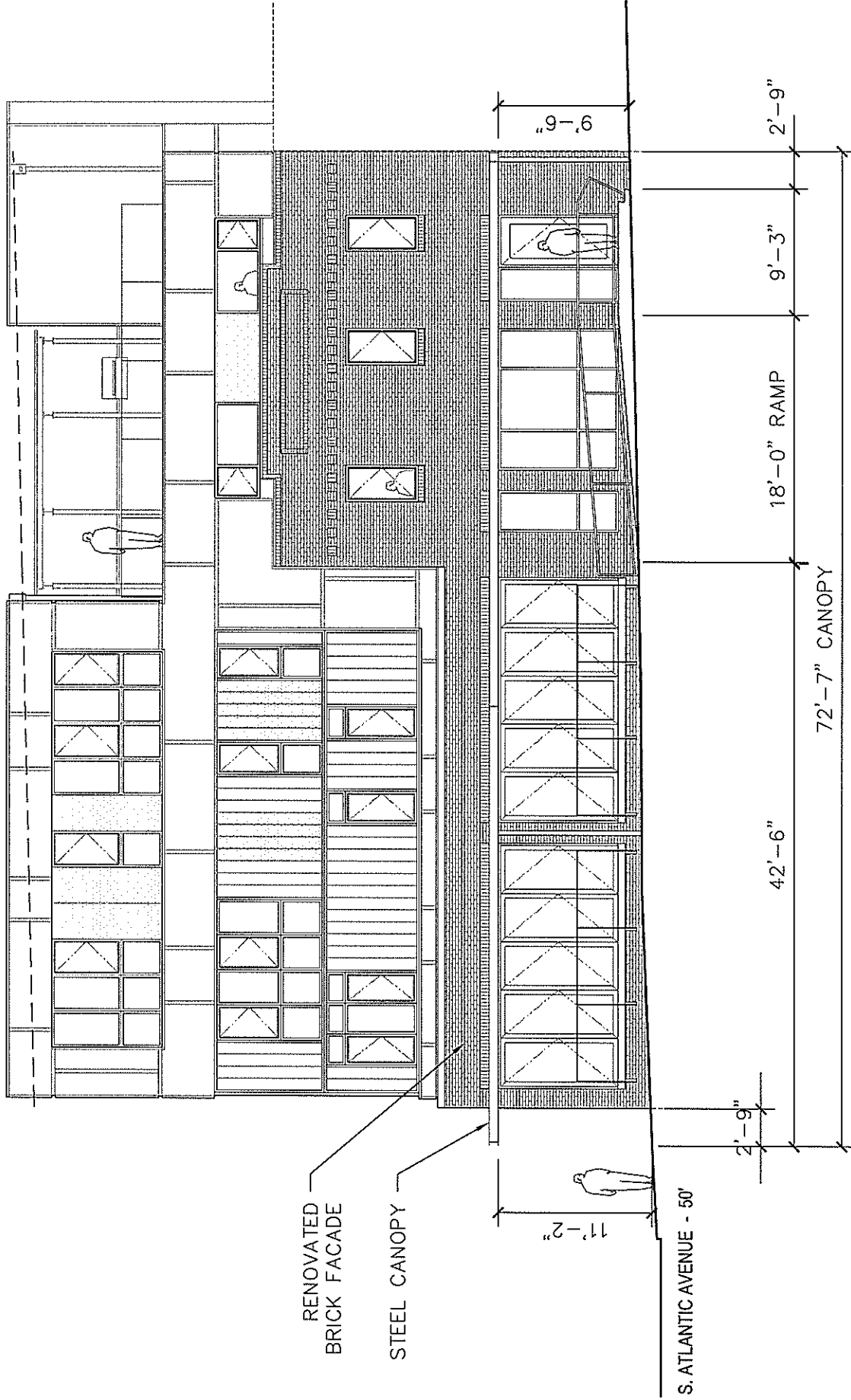


Penn-Atlantic Building



**Site Plan**  
 5226 & 5232 Penn Avenue  
 Pittsburgh, PA 15224  
 31 May 2019





RENOVATED  
BRICK FACADE

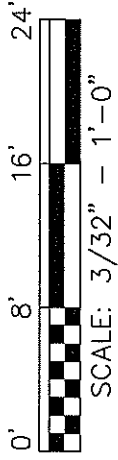
STEEL CANOPY

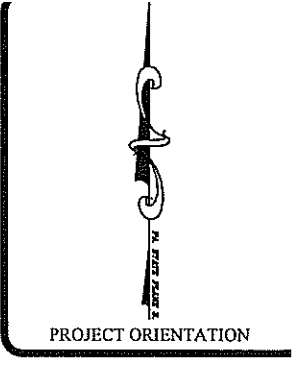
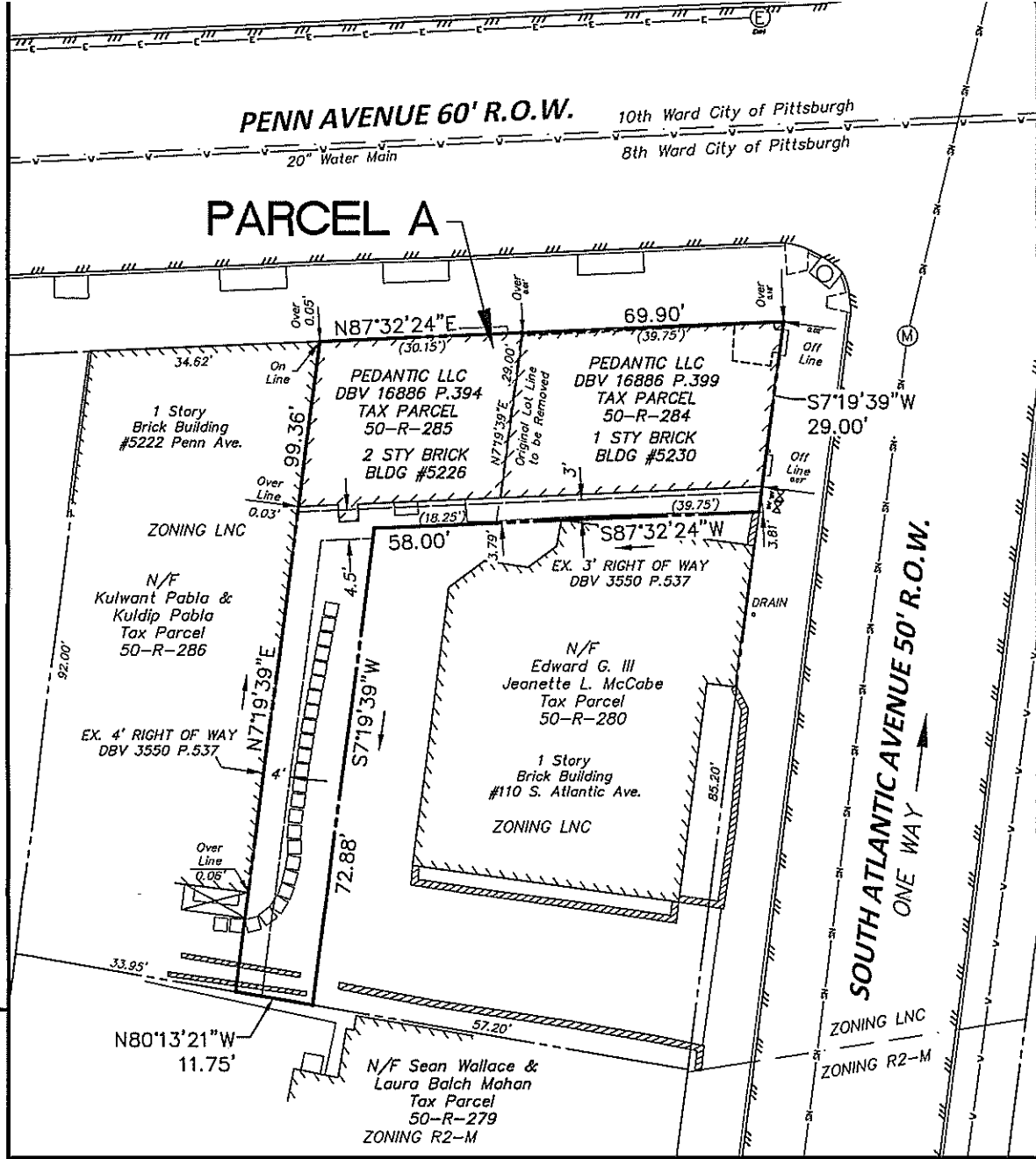
S. ATLANTIC AVENUE - 50'

Penn-Atlantic Building



North Elevation (Penn Ave)  
5226 & 5232 Penn Avenue  
Pittsburgh, PA 15224  
31 May 2019

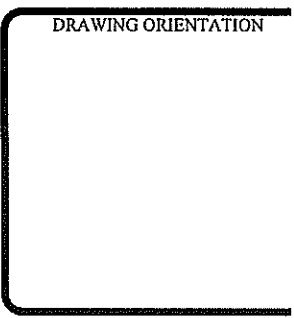




**HAMPTON TECHNICAL ASSOCIATES**

ENGINEERING LAND SURVEYORS  
ESTABLISHED 1960  
www.hampton-technical.com

**Corporate Office**  
Etna Technical Center  
35 Wilson Street, Suite 201  
Pittsburgh, PA 15223  
PHONE: (412) 781-9660  
FAX: (412) 781-5904



**EXISTING AREA TABULATION:**

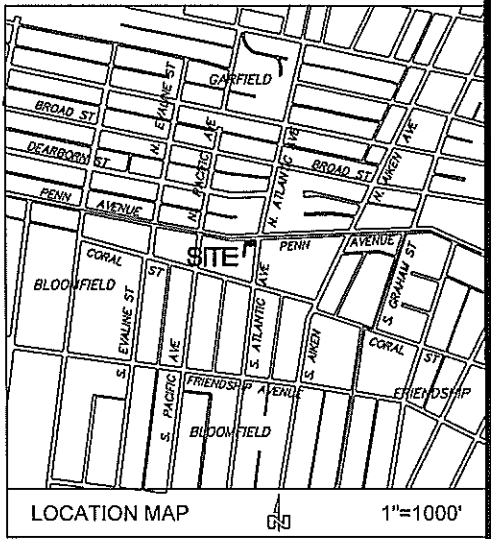
0050-R-00284	= 1,135 SQ.FT. OR 0.0260 ACRES
0050-R-00285	= 1,702 SQ.FT. OR 0.0391 ACRES
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<b>TOTAL PROPERTY</b>	<b>= 2,837 SQ.FT. OR 0.0651 ACRES</b>

**PROPOSED AREA TABULATION:**

<b>PARCEL A</b>	<b>= 2,837 SQ.FT. OR 0.0651 ACRES</b>
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**ZONING = LNC LOCAL NEIGHBORHOOD COMMERCIAL DISTR.**

MINIMUM LOT SIZE	= 0 SQ.FT.
MAXIMUM FLOOR AREA RATIO	= 2:1
MAXIMUM LOT COVER AGE	= 90%
MINIMUM FRONT SETBACK	= NONE REQ'D
MINIMUM REAR SETBACK	= 20 FEET
MINIMUM EXTERIOR SIDEYARD SETBACK	= NONE REQ'D
MINIMUM INTERIOR SIDEYARD SETBACK	= NONE REQ'D
MAXIMUM HEIGHT	= 45 FT(not to exceed 3 stories)



**PROJECT TITLE:**  
**PENN AVENUE PEDANTIC PLAN**

Being a Lot consolidation of Tax Parcels 50-R-284 and 50-R-285  
8th Ward, City of Pittsburgh, Allegheny county, PA

**CLIENT ADDRESS:**  
Pedantic, LLC - Henry Simonds  
601 St. James St., Pgh PA 15232

**PROJECT LOCATION:**  
5336 & 5230 Penn Avenue  
Pittsburgh, PA 15224



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/13/2019

**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.**

**IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must 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 Conway E&S Inc 100 Allegheny Dr, Suite 100 Warrendale, PA 15086	CONTACT NAME:	
	PHONE (A/C, No., Ext):	FAX (A/C, No):
E-MAIL ADDRESS:		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A : Nautilus Insurance Company		17370
INSURED Pedantic LLC c/o Hillman Company Pittsburgh, PA 15219	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

**COVERAGES**

CERTIFICATE NUMBER:

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		X	NN-958035	7/27/2018	7/27/2019	EACH OCCURRENCE	\$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
							MED EXP (Any one person)	\$ 5,000
							PERSONAL & ADV INJURY	\$ 1,000,000
							GENERAL AGGREGATE	\$ 2,000,000
							PRODUCTS - COMP/OP AGG	\$ EXCLUDED
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident)	\$
							BODILY INJURY (Per person)	\$
							BODILY INJURY (Per accident)	\$
							PROPERTY DAMAGE (Per accident)	\$
								\$
	UMBRELLA LIAB EXCESS LIAB						EACH OCCURRENCE	\$
							AGGREGATE	\$
								\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						WC STATU-TORY LIMITS	OTH-ER
							E.L. EACH ACCIDENT	\$
							E.L. DISEASE - EA EMPLOYEE	\$
							E.L. DISEASE - POLICY LIMIT	\$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)  
Certificate holder is listed as Additional Insured per form CG2013 - Additional Insured - State or Government Agency or Subdivision or Political Subdivision - Permits or Authorizations Relating to Premises.  
5226 Penn Ave

**CERTIFICATE HOLDER****CANCELLATION**

City of Pittsburgh Department of Mobility & Infrastructure 611 Second Avenue Pittsburgh, PA 15219	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 Jeffrey C. Conway



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
06/11/2019

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.

**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).

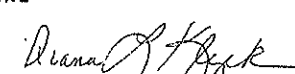
<b>PRODUCER</b> Simpson & McCrady LLC 310-330 Grant Street Suite 1320 Pittsburgh PA 15219-2233	<b>CONTACT NAME:</b> Diana Klezek <b>PHONE (A/C, No, Ext):</b> (412) 261-2222 <b>E-MAIL ADDRESS:</b> dklezek@simpson-mccrady.com	<b>FAX (A/C, No):</b> (412) 261-3437
	<b>INSURER(S) AFFORDING COVERAGE</b>	
<b>INSURED</b> Pedantic LLC c/o Hillman Company 310-330 Grant St, Ste 1320 Pittsburgh PA 15219	<b>INSURER A:</b> ACE Property & Casualty Insurance Co.	
	<b>INSURER B:</b>	
	<b>INSURER C:</b>	
	<b>INSURER D:</b>	
	<b>INSURER E:</b>	

**COVERAGES**                      **CERTIFICATE NUMBER:** CL1961126970                      **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	<b>COMMERCIAL GENERAL LIABILITY</b> <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 type="checkbox"/> LOC OTHER:			D52739962	05/17/2019	05/17/2020	EACH OCCURRENCE \$ 1,000,000
							DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000
							MED EXP (Any one person) \$ 5,000
							PERSONAL & ADV INJURY \$
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							Policy Aggregate \$ 2,000,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE    OTH-ER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES** (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
 Re: 5230 Penn Ave. Encroachment Permit. City of Pittsburgh is an additional insured with respects to general liability per contract.

<b>CERTIFICATE HOLDER</b>  City of Pittsburgh, Dept. of Mobility & Infrastructure 611 Second Avenue Pittsburgh PA 15219	<b>CANCELLATION</b>  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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