



Event Name: _____

Date Received: _____

SPECIAL EVENT PERMIT APPLICATION

(Applications must be submitted at least 60 days prior to an event to allow for sufficient staff time to review the request.)

APPLICATION REQUIREMENTS

- (a) A Certificate of Insurance listing the Village of Mundelein, its officials, agents, employees and volunteers as additional insured, is required for all events that utilize public property. A certificate of insurance must be supplied before the special event permit is issued (see attached sample).
- (b) A Detailed Site Plan or Route Map **MUST** be included with this application.
- (c) The submittal of a special event permit application does not imply that a permit will be issued or the event is approved. The Village staff will review the information provided and may contact the sponsoring organization for more information. The staff has the duty to make recommendations and suggest changes to the proposed event that provide for the best interest of the public health and safety prior to issuance of the permit.
- (d) Every question on this application must be completed. Incomplete applications will be returned for resubmittal. If a question does not apply to the event write N/A.
- (e) Submit one original and five (5) copies of the application to the Community Development Department.
- (f) Additional permits may be required.

Liquor
 Park District
 Health Department

Tent
 Electrical

Signage
 Fireworks

NAME OF EVENT:

DATE OF EVENT: _____

1. Sponsoring Organization: _____

For Profit _____ Not For Profit _____

2. Address: _____ Zip Code: _____

3. Telephone Number: (_____) _____
Area Code

4. Event Contact Person: _____

5. Telephone Numbers: Day (_____) _____ Evening: (_____) _____
E-Mail Address: _____

TYPE OF EVENT:

- | | |
|---|---|
| <input type="checkbox"/> Sporting Event/Runs/Walkathons | <input type="checkbox"/> Carnival/Circus |
| <input type="checkbox"/> Sidewalk Sales | <input type="checkbox"/> Rallies |
| <input type="checkbox"/> Festival | <input type="checkbox"/> Car Show |
| <input type="checkbox"/> Parade | <input type="checkbox"/> Arts & Crafts Fair |
| <input type="checkbox"/> Other (Please explain) _____ | |

CHECK ALL ACTIVITIES PROPOSED TO BE INCLUDED IN YOUR EVENT:

- | | |
|------------------------------------|---------------------------------------|
| <input type="checkbox"/> Amplifier | <input type="checkbox"/> Raffle |
| <input type="checkbox"/> Carnival | <input type="checkbox"/> Liquor |
| <input type="checkbox"/> Tent | <input type="checkbox"/> Fireworks |
| <input type="checkbox"/> Circus | <input type="checkbox"/> Food Vendors |

“If liquor is planned to be served at this event, then a Special Event Liquor license application shall be submitted to the Community Development Department at the same time of this application submittal. Applications for Special Event Liquor License may be obtained at the Customer Service Office at the Village Hall. Please note that a State of Illinois Liquor License is also required. Applications may be downloaded at www.illinois.gov/license.cfm. “

6. General Description and Purpose of the Event: _____

7. Will attendees be charged an entry/admission fee (excluding vendors):

NO _____ YES _____

If yes, how much? \$_____.

List **ALL** parties who will receive the proceeds from this event: _____

8. Event Operation – List each day individually (No Rain Dates):

Date: _____

Hours: _____

Date: _____

Hours: _____

Date: _____

Hours: _____

Date: _____

Hours: _____

Set up for Event:

Date: _____

Hours: _____

Date: _____

Hours: _____

Dismantling of Event:

Date: _____

Hours: _____

Date: _____

Hours: _____

Dismantling of the event must include, but is not limited to, restoration of the site, dismantling tents, removing booths, filling tent holes, and removing Port-O-Johns and dumpsters.

9. Location of Event (Check as many as appropriate):

Public Parking Lot Private Parking Lot Street(s) Park Sidewalks Other

List proposed streets to be used:

<u>Street</u>	<u>Date/Time Closing</u>	<u>Date/Time Reopening</u>

Closest cross streets to event site: _____

Street address or block number: _____

Park Name: _____

Please contact the Park District (847-566-0650) for an application if your event is limited to park use.

10. Has the Park District approved the event? NO YES

11. Is the removal of on-street parking being requested? NO YES

<u>Street</u>	<u>Date/Time Closing</u>	<u>Date/Time Reopening</u>

12. As a condition of the approval, your organization may be **required** to erect crowd control fencing. Are you proposing crowd control fencing for this event?

NO YES If yes, show fencing on the site plan.

Total footage: _____

Liquor sales area must be double-fenced. Indicate these areas on the site plan.

Total footage: _____

Please contact the Village Clerk for a liquor license application if liquor sales are to be a part of the event.

13. Are any of the following traffic controls being requested from the Village? (The Village may require traffic controls be furnished by the event organizer).

Traffic signal assistance	_____	Barricades	_____
Pavement markings	_____	Cones	_____
Police escort	_____	Special event signage	_____
Crossing guards	_____		

Please describe use:

14. Parking Areas

a. Indicate parking areas identified to accommodate persons attending event. Handicapped parking must be included: _____

b. Indicate parking area identified to accommodate event sponsor, employees, volunteers, and other vehicles not needed on site: _____

(Approval by the parking lot owner is required. A letter from the property owner indicating their approval is required).

15. Is this a first time event at this location? NO _____ YES _____

If no, how does this event differ from previous years? _____

16. Daily projected number of persons attending this event, both participants and spectators:

_____ 0-150	_____ 151-500
_____ 501-1,000	_____ 1,001-1,500
_____ 1,501-2,000	_____ 2,000-3,000
_____ 3,000-5,000	_____ Over 5,000

Number and type of vehicles used for event: _____

Purpose of vehicles: _____

17. Is a tent or other temporary structure(s) (including booths) being erected or used on site for this event? NO _____ YES _____

If yes, indicate tents and structures in site plan. **You will be required to obtain a tent permit from the Community Development Department (847) 949-3283. Tents are not permitted on public streets or rights-of-way unless otherwise approved by the Village.**

18. Will you be installing a generator to be used for power? NO _____ YES _____

19. Will you be installing electric wiring? NO _____ YES _____

If yes, applicant must obtain electrical permit from electrical inspections (847-949-3283) for wiring other than Village equipment.

20. Will signs or banners be used: NO _____ YES _____ If yes, how many _____

Contact Community Development Department for sign placement regulations (847-949-3283).

Describe in detail the proposed location(s) or attach a site plan: _____

21. The Village of Mundelein recommends:

Two Port-O-Johns for every 250 people in attendance at one time for event lasting over two hours **and** one handicapped stall for every 500 participants.

How many Port-O-Johns will you be providing on-site for this festival? _____
(Provide location map or text)

As a condition of approval, an adequate supply of port-o-johns or indoor restroom facilities are required.

22. Are fireworks proposed for this event? NO _____ YES _____

Contact the Fire Department for a fireworks permit application.

23. How do you plan to publicize this proposed event? Attach a copy of publicity plan and brochures. _____

24. List all entertainment and/or performances which will have amplification equipment.

<u>Event</u>	<u>Hours</u>
_____	_____
_____	_____
_____	_____

25. Will water be needed? NO _____ YES _____

Indicate the source of water: _____

26. All areas must be left clean of debris. To avoid wind-blown refuse, we recommend the use of lidded containers. How do you plan to remove refuse and garbage from the event site? Describe in detail: _____

Name of refuse company being used: _____

Phone No. (____) _____

Cleanup Committee Chairperson: _____

Daytime phone number: (____) _____

24 Hour emergency contact person and telephone: (____) _____

27. Are trash receptacles proposed for the event area?

NO _____ YES _____ How many? _____

Where exactly at the event site should they be delivered or located? Mark location on site plan if special placement is requested. _____

All dumpsters must be indicated on site plan.

28. Are vendors (food and craft) participating in your event?

NO _____ YES _____

If yes, how many total vendors? _____

How many are food vendors? _____

How many are craft vendors? _____

For food vendors, contact the Lake County Department of Health (847-360-6700) to apply for a permit.

29. Safety and Security Requirements: Please check all Police and Fire Department Services you will require.

POLICE: Crowd Control Money Escorts Police Presence/Security
 Explorers CRW/Night Security

FIRE: Ambulance/EMT How many units? _____
 EMA
 Fireworks Permit

30. Signature of sponsoring organization representative:

31. Signature of property owner (if event is to be held on private property):

By signing above, I indicate my consent for the event described in this application to be held on my property.

Please return to:

Village of Mundelein
Community Development Department
440 East Hawley Street
Mundelein, IL 60060

Office Use Only

To Fire Dept. _____ Date _____
To Police Dept. _____ Date _____
To Public Works _____ Date _____
To Community Dev. _____ Date _____

EVENT NAME: _____
DATE TO DEPTS: _____
EVENT DATE: _____

SPECIAL EVENT COST ESTIMATE AND APPROVAL FORM

____ Fire Dept. ____ Police Dept. ____ Dept. of Public Works
____ Village Clerk ____ Public Utilities ____ Community Development Dept.

Please indicate if you want an organization meeting for this event ____ YES ____ NO

What issues need to be discussed: _____

FIRE DEPARTMENT:

Personnel _____

Cost \$ _____

Equipment _____

Cost \$ _____

Total Cost \$ _____

Do you recommend this event for approval:

YES ____ NO ____ YES (with Conditions) ____

Conditions: _____

POLICE DEPARTMENT:

Personnel _____

Cost \$ _____

Equipment _____

Cost \$ _____

Total Cost \$ _____

Do you recommend this event for approval:

YES ____ NO ____ YES (with Conditions) ____

Conditions: _____

DEPARTMENT OF PUBLIC WORKS:

Personnel _____

Cost \$ _____

Equipment _____

Cost \$ _____

Total Cost \$ _____

Do you recommend this event for approval:

YES _____ NO _____ YES (with Conditions) _____

Conditions: _____

Community Development Department

Personnel _____

Cost \$ _____

Equipment _____

Cost \$ _____

Total Cost \$ _____

Do you recommend this event for approval:

YES _____ NO _____ YES (with Conditions) _____

Conditions: _____

VILLAGE CLERK: Licenses and Permits

Amplifier Permit \$ _____

Liquor \$ _____

Raffle \$ _____

Carnival \$ _____

PUBLIC WORKS DEPARTMENT:

Water Usage \$ _____

Electric Usage \$ _____

COMMUNITY DEVELOPMENT DEPARTMENT:

Permits: Tent \$ _____ Inspection \$ _____
Signs \$ _____

Additional Inspection:

Carnival Inspection \$ _____

Total Cost \$ _____

TOTAL COST OF THE EVENT AS CALCULATED BY THE SPECIAL EVENTS COORDINATOR:

\$ _____ Village Services
\$ _____ Permits and Licenses
\$ _____ **TOTAL COST**

\$ _____ Deposit required
\$ _____ Waiver amount

Submitted to Village Board – Date: _____

Amount Approved for Village Contribution: \$ _____