

# SPECIAL EVENT ASSESSMENT FORM



THIS FORM MUST BE COMPLETED IN FULL & SUBMITTED  
90 DAYS PRIOR TO THE EVENT

## Sponsoring Entity Checklist

Please submit the following:

1. Completed and signed Special Event Application
  - Section 1 – General Information
  - Section 2 – Permits
  - Section 3 – Site Plan and/or Route Map
  - Section 4 – Task List and Due Dates
  - Certificate of Insurance
2. Completed and signed applications(s) for other permits(s) (See Section 2)
  - Carnival, Fair or Other Exhibition Permit Application
  - Parade, Procession or Run/Walk/Bike Race Permit Application
  - Open-air Meeting or Mass Gathering Permit Application
  - Fireworks Permit Application
  - Raffle Registration Application
  - Temporary Liquor License Application
  - Building Permit Application (for tent over 120 sq. ft. in area)
  - Temporary Food Service Permit (DuPage Co. Health Dept. 630-682-7979 x7182)
3. Submittal of Permit/License Fees

## City of West Chicago Checklist (FOR INTERNAL USE ONLY)

1. Completed and signed Special Event Application
  - Section 1 – General Information
  - Section 2 – Permits
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  - Section 4 – Task List and Due Dates
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  - Building Permit Application

Received: \_\_\_\_\_ Fee Paid: \$ \_\_\_\_\_

Receipt # \_\_\_\_\_ Check # \_\_\_\_\_

Event Acknowledgement Form returned by:

CDD \_\_\_\_\_ Police Dept \_\_\_\_\_ Fire Dept. \_\_\_\_\_ PW \_\_\_\_\_

- Background checks completed by Police Dept
- Food vendor list supplied to DuPage Co. Health Dept. Date \_\_\_\_\_
- Certificate of Insurance received and approved Date \_\_\_\_\_

**SECTION 1 – GENERAL INFORMATION**

Name of Event: \_\_\_\_\_

Type of Event:

Parade/Procession/Demonstration/Open Air Meetings/Mass Gatherings

Walk/Run/Bike  Carnivals/Fairs  Fireworks  Other \_\_\_\_\_

Location of Event: \_\_\_\_\_

Date(s) of Event: \_\_\_\_\_ Hours of Event: \_\_\_\_\_ to \_\_\_\_\_ Est. Attendance: \_\_\_\_\_

Event Website: \_\_\_\_\_

Purpose of event: \_\_\_\_\_

Name of Sponsoring Organization(s): \_\_\_\_\_

Organization's Legal Status (i.e. NFP, Partnership, Corporation): \_\_\_\_\_

Contact person from sponsoring organization: \_\_\_\_\_

Organizer address: \_\_\_\_\_

City/State/Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

2<sup>nd</sup> contact person (emergency): \_\_\_\_\_ Phone: \_\_\_\_\_

Is this an annual event?  Yes  No If Yes, provide next year's event date: \_\_\_\_\_

If the event is a recurring event, please state any problems and/or incidents that have occurred in past years, such as noise or neighborhood parking complaints.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What, if anything, are you doing to rectify the problem(s)?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

## SECTION 2 – PERMITS

Will your event include a carnival, fair or exhibition?  Yes  No

*If yes, you must submit a **Carnival, Fair or Other Exhibitions Permit Application** ninety (90) days prior to the event. Please visit [www.westchicago.org](http://www.westchicago.org) under Forms or contact the City of West Chicago at (630) 293-2200 ext. 135 for an application.*

Will your event include:

Parade/Procession  Demonstration  Open air meeting/Mass Gathering  Run/walk/bike race

*If yes, you must submit the related **Permit Application** ninety (90) days prior to the event.*

*Please visit [www.westchicago.org](http://www.westchicago.org) under Forms or contact the City of West Chicago at (630) 293-2200 ext. 135 for individual applications.*

Will your event include a fireworks display?  Yes  No

*If yes, you must submit a **Fireworks Permit Application** ninety (90) days prior to the event.*

*Please visit [www.westchicago.org](http://www.westchicago.org) under Forms or contact the City of West Chicago at (630) 293-2200 ext. 135 for an application.*

Are you holding a raffle at your event?  Yes  No

*If yes, you must submit a **Raffle Registration Application** fourteen (14) days prior to the event. Not all applicants will qualify for a license. Please visit [www.westchicago.org](http://www.westchicago.org) under Forms or contact the City of West Chicago at (630) 293-2200 ext. 170 for an application.*

Will you be applying for a Temporary Liquor License?  Yes  No

*If yes, you must submit a **Temporary Liquor License Application** thirty (30) days prior to the event. Not all applicants will qualify for a license. Please contact the City of West Chicago at (630) 293-2200 ext. 170 for an application and all guideline requirements.*

Does your event include the use of a tent in excess of 120 sq. ft. in area?  Yes  No

*If yes, you must submit a **Building Permit Application** thirty (30) days prior to the event.*

*Please visit [www.westchicago.org](http://www.westchicago.org) under Forms or contact the City of West Chicago at (630) 293-2200 ext. 131 for an application.*

Will you be serving food at your event?  Yes  No

*If yes, you must submit a **Temporary Food Service Permit Application** thirty (30) days prior to the event. Please contact the DuPage County Health Department at (630) 682-7979 x7182.*

*Note: A complete list of food vendors attending your event must be submitted to the DuPage County Health Department 14 days prior to the event.*

Are you requesting services from these departments?

Police  Fire District / Paramedics Specify services: \_\_\_\_\_

\_\_\_\_\_

Will you be utilizing any of the following services?

Water  Electric  Other \_\_\_\_\_

**SECTION 3 – SITE PLAN AND/OR ROUTE MAP**

Please attach a separate sheet to illustrate the layout for your event.

***If applicable, the following must be included:***

- |                                      |   |
|--------------------------------------|---|
| Location of garbage receptacles (G)  | Location and number of barricades (B)             |
| Location of toilets (T)              | Location of fire lane (FL)                        |
| Location of hand washing sinks (HWS) | Location of fire extinguishers (FE)               |
| Location of retail vendors (RV)      | Public entrances and exits (PE)                   |
| Location of food vendors (FV)        | Location of sound stages and amplified sound (S)  |
| Location of first aid (FA)           | Location of residential streets surrounding event |

*Are you requesting the use of any City-owned property, i.e. City streets, parking lots, or sidewalks?*

Yes  No If yes, please indicate the property that you are requesting to use.

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Would you like to request the closing of City streets?  Yes  No

*If yes, please fill in the following information or submit a route map along with this application:*

Street	From	To	Dates	Times
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

## SECTION 4 – TASK LIST AND DUE DATES

Use this form to determine the date each of these tasks needs to be completed. For tasks that do not apply, please mark "N/A" in the Due Date column. If the Due Date falls on a weekend or holiday, the Due Date becomes the next normal business day. However, this does not affect the other Due Dates, as they are only dependent on the date of the special event.

Task to be completed (All items due to City unless noted)	Days Due Before Event	Due Date
Date of Special Event	N/A	
Notify residents/businesses of special event	14 days	
Submit Raffle Registration Application	14 days	
Submit List of Food Vendors to City of West Chicago	14 days	
Submit <b>Original</b> Certificate of Insurance	21 days	
Submit Temporary Food Service Permit Application (DuPage County Health Dept. – 630-682-7979 x7182)	30 days	
Submit Building (Tent) Permit Application	30 days	
Submit Temporary Liquor License Application	30 days	
Submit Fireworks Permit Application	90 days	
Submit Carnival, Fair or Other Exhibition Permit Application	90 days	
Submit Parade, Procession, Open-air Meeting , Mass Gathering, Demonstration, Run/Walk/Bike Race Permit Applications	90 days	

The Organization and the authorized signatory below agree to inform the City of West Chicago of any changes in the application at least thirty (30) days prior to the event. *Please note: Final approval of this event is pending satisfactory completion of Certificate of Insurance requirements.*

**All applications must be signed and notarized.**

\_\_\_\_\_  
(Name of Organization) (Print Name of Signatory) (Date)

By \_\_\_\_\_  
(Authorized Signatory) \_\_\_\_\_  
(Notary Public)

Signed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

After submitting all forms, your application will be reviewed by City staff. All departments that will be involved in providing services or permits for the event will be notified. **Please do not assume that all aspects of the event will be approved. You may be asked to make some changes to your plan based on the availability of services or scheduling of other events.**

The City of West Chicago reserves the right to cancel any event at any time for reasons deemed necessary by the City Council and/or City Administrator.

**Deliver all completed items to:**

City of West Chicago, Administration Department, 475 Main Street, West Chicago, IL 60185