

Special Event Permit

Application

Submit this application, along with all necessary documentation and administrative fee if applicable, to the City of Urbana Public Works Department, c/o Special Events, 706 S. Glover Ave., Urbana, IL 61802.

Event Information

Name of Event:					
Location(s):					
Date of Event:		Start Time:	AM PM	End Time:	AM PM
Type of Event:			Estimated	# of Participants:	
Run/Walk/Bike Festival/Fair			Estimat	ted Attendance:	
Parade					
Commercial Property Event Free Speech Event			Regis	tration/Entrance Fee:	YES NO
Other:				Fee Amount:	
Is this Event a Fundraiser? YES	NO	If yes, list the	e Beneficiary:		
Has this event been held before?	YES NO				
Organization Information					
Organization Name:					
Contact Person:					
Address:					
Phone:	Fax:	E	Email:		
This organization is registered w	rith the State of	of Illinois as a non-	profit organizatio	n: YES NO	
*If box is checked, please a					
On Site Person In Charge On D	ay Of Event				
Name:	-				
Address:					
Phone:	Cell:				

Relation to the above organization:

Describe your event. What activities are planned? Be as specific as possible.

Will the event be accessible to persons with disabilities? YES NO *If no, please explain.*

General Service Questions

Section A: PUBLIC WORKS DEPARTMENT: Event Set-up/Traffic Control/Electrical Services/ Parking/Waste and Recycling/ Event Clean-up

Will the public right-of-way be used for this event? YES NO

Are street closures being requested? YES NO If yes, list the streets. Be as specific as possible.

Reason for street closure:

Does your event require the use of metered parking? YES NO

*If parking meters are on these streets, contact the City's Parking Section at (217)384-2314 or parkingmeters@urbanaillinois.us

Does your event require any additional parking related requests or considerations? YES NO * *If yes, please describe:*

Will amplified music be used as part of this event? YES NO

- * Hours of Operation:_____
- * What kind of amplified music (live band, DJ, etc.)?_____
- * If yes, please provide the location of the stage on the required Site Plan/Map.

What is your plan for cleaning, recycling and disposing of all refuse from this event?

Please indicate if any of the following services need to be provided for your event:

Electrical

Cones/Barricades

Signs/Banner Placement

Section B: COMMUNITY DEVELOPMENT SERVICES DEPARTMENT: Tents/Temporary

Will you be utilizing a tent for your event? YES NO

* If your tent is <u>more than 400 square feet or more</u> in size, you will need a tent permit. Contact the Building Safety Department at (217) 384-2443 and attach a copy of your tent permit to this application.

* If your tent is <u>under 400 square feet</u> or smaller in size, indicate the size and location of the tents on the site map.

Will you be utilizing any additional temporary structures? If yes, describe the structures below. Be as specific as possible.

Section C: POLICE DEPARTMENT:

Is traffic control or crowd control necessary for your event? YES NO *If yes, describe your needs below.*

Will private security be used at your event? YES NO		If yes, provide their contact information below.		
Company Name:				
Contact Person:				
Phone:	Fax:	Email:	<u> </u>	

Section D: FIRE DEPARTMENT:

Will open flames, pyrotechnics or caustic substances be used in any way during this event? YES NO

* You must provide access to all sites in the case of emergencies.

Section E: MAYOR'S OFFICE:

Will alcoholic beverages be served or sold? YES NO

* If yes, contact the Urbana City Mayor's Office at "liquor@urbanaillinois.us" to complete a temporary liquor license application. You must attach a copy of your license to this application.

Will food be served or sold? YES NO

* If you will be serving and/or selling food for a period of less than 14 consecutive days, a temporary food permit is required. You must attach a copy of your permit to this application. * Applications for temporary food permits and their applicable fees must be submitted to the Champaign-Urbana Public Health District a <u>minimum of two weeks prior</u> to the event. Call (217) 373-7900 for more information.

Section F: UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN:

Is your event taking place on campus? YES NO

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Applicant agrees to defend the City from and against any and all claims, suits, or actions for death or injury to persons or damage to property brought against the City arising from any alleged claims, acts or omissions in connection with this Special Event Permit, whether or not suit is filed, unless such claim, suit or cause of action was based solely on the negligence of the City, its employees, agents or contractors. Additionally, applicant shall indemnify the City for any sums the City becomes obligated to pay as damages arising out of such circumstances, except to the extent such damages are due solely to the negligence of the City, its employees, agents or contractors. Additionally, the applicant agrees to reimburse the City for any and all costs and expenses incurred by the City as a result of the Special Event. The applicant is an authorized representative/ agent for the organization sponsoring the Special Event.

Name of Event:	
Organization:	
Contact Person (printed name):	
Title:	
Signature:	

Electronic Signature Agreement. By checking this box, I am signing this Agreement electronically and agree that my electronic or digital signature on this Agreement has the full legal effect as that of my written signature.

By checking this box, you are indicating that you have read and understand all City of Urbana policies pertaining to Special Events and that noncompliance with any city ordinance or state or federal law may result in revocation of the permit.

Date: _____

Signature: