



City of Geneva, Illinois Special Event Application

Thank you for considering the City of Geneva as you plan a special event. Per the City Code, City Council approval is required to use public “right of way” and public property for special events. Please refer to the *Special Event Policy and Procedures* while completing this application. Some low impact events can be approved administratively, using the “short” form, also found on the City website. This application is to be used for larger events, including:

- 1) City designated Festivals and multi-day events
- 2) Events with alcohol
- 3) Walk/Runs not on the City’s pre-approved routes
- 4) Events with medium to high threat to public safety

For internal use:

_____ **Date of Event**
 _____ **Date of COW**
 _____ **Date of CC**
Yes or No **Appearance at Council**

Special Attention needed by:

_____ City Administrator Office
 _____ Building Division
 _____ Fire Department
 _____ Police Department
 _____ Public Works

Includes:

_____ Tent License
 _____ Alcohol Special Event License

Special Event Applications should be approved by the City Council 60 days in advance of the event. **Please note that requests for services**, and/or changes to initial approved event applications, are not guaranteed for approval. The City will provide services during the course of regular business operation if we can. If overtime or additional City resources are required or damage is incurred to City property, your organization is obligated to pay for these services. You may be asked to make some changes based on the City’s availability of staff to provide services and/or scheduling of other events.

- **Police services** (street closures, use of parking spaces, barricades, etc.), must be coordinated with Commander Eric Passarelli; call him at (630) 232-4736. If a street closure is requested, organizers are asked to inform affected property owners prior to consideration of the request.
- **Fire Department or Emergency Medical Services (EMS)**, must be coordinated with Deputy Fire Chief Mark Einwich; call him at (630) 232-2530.
- **If you are requesting a special event liquor license, or tent permit**, please submit those forms with this application and they will be routed to the appropriate departments, along with this approval request.

Your application should include the following:

- Event information including your request for city services, site plan and/or route
- Hold harmless agreement on your organization’s letterhead (sample language attached)
- Sample waiver used by participants, if applicable
- Certificate of insurance naming the City, with level of coverage according to these levels of hazard, as identified in the City’s Special Event Policy.

Low Hazard- a minimum of \$300,000 per occurrence and/or aggregate limit of liability for personal injury, bodily injury and property damage.

Medium Hazard-General Liability shall not be less than \$500,000 per occurrence if alcohol is NOT to be served; and no less than \$1,000,000 if liquor license(s) are an event component.

High Hazard –Limits of general liability shall not be less than \$1,000,000 per occurrence and/or aggregate combined single limit for personal injury, bodily injury and property damage.

Special Hazard – To be reviewed on an individual basis, but in no instance shall the insurance required be less than that required for High Hazard events.

For any private property, you must have permission of the property owner. This includes property owned by other taxing bodies such as:

- Geneva Public Library, (630) 232-0780
- Geneva Park District, (630) 232-4542
- Fox River Bike Trail, Jim Eby of the Batavia Park District, (630) 879-5235, ext. 2011
- Kane County Government, Mary Remiyac, (630) 232-5973
- Kane County Forest Preserve District, (630) 232-1242
- Geneva School District 304, (630) 463-3000
- Geneva Post Office, (630) 232-6262

EVENT INFORMATION

A. Name of Event: _____

B. Name of organization staging event: _____

Address _____ City: _____ State: _____ Zip: _____

Phone: _____ web: <http://www.> _____

Is the organization registered with the State of Illinois as a non-profit organization? yes no

C. Name of the applicant: _____ Relationship to the organization? _____

Are you 18 years or older? yes no

Work phone: _____ Cell phone: _____ Home phone: _____

Email: _____

Address: _____ City: _____ State: _____ Zip: _____

D. If other than (B) above, who will be the City's main contact?

Main contact: _____ Relationship to the organization? _____

Work phone: _____ Cell phone: _____ Home phone: _____

Email: _____

Address: _____ City: _____ State: _____ Zip: _____

E. Type of event (check all that apply):

- | | | |
|--|---------------------------------------|---------------------------------------|
| <input type="checkbox"/> Festival/Fair | <input type="checkbox"/> Parade/March | <input type="checkbox"/> Concert |
| <input type="checkbox"/> Race/Walk/Bike Ride | <input type="checkbox"/> Carnival | <input type="checkbox"/> Other: _____ |

F. Description of the proposed event:

G. Site of the Proposed Event:

H. Event Details:

Event start time: Date _____ Time _____

Event finish time: Date _____ Time _____

Is the event one day or multiple? One Day Multiple

Is the event in one location or multiple? One Location Multiple

What, if any, is chosen for a rain location on the original date? _____

What, if any, is chosen for a rain date? _____

Is this an annual event? yes no

Is the event a fundraiser? yes no Beneficiary: _____

Registration/Entrance Fee: yes no Amount: \$ _____

I. Estimated attendance (max per day): _____

J. Is the event on public or private property? Please check all that apply:

a. City sidewalk City streets Parking spaces City parking lots
(if yes to any, be sure to provide details in section M)

b. Private property
If so, owned by whom? _____
Please identify by address or street corner: _____

K. Do you use a liability release form or signed waiver? yes no *If yes, please attach.*

L. Does your event require signage? (Note: All signs associated with your special event should be included in application for approval. Such signs shall comply with the temporary sign regulations in section 11-12-7B of Zoning Ordinance)

yes no

If yes, please describe signage type and location of each: _____

M. Submit a detailed explanation, including drawings, site plan, and diagrams where applicable, of your plans to provide for the following City services, if requested. (Notate the map/site diagram in section N as needed)

Requested City Services	Details <i>Describe where and why the service is needed. Indicate needs on a site diagram, either in Section N, or attach a map.</i>
Does your event require the use of city sidewalks? <input type="checkbox"/> Yes <input type="checkbox"/> No	Where? Please map in Section N or attached site plan.
Does your event require the use of city parking lots? <input type="checkbox"/> Yes <input type="checkbox"/> No	Which lots? Please map in Section N or attached site plan.
Does your event require closure of any on-street parking spaces? <input type="checkbox"/> Yes <input type="checkbox"/> No	For what use? (for example, trolley, tent, other?) Which spaces? Please map in Section N or attached site plan.
Does your event have a plan for vehicle access and parking facilities? <input type="checkbox"/> Yes <input type="checkbox"/> No	Please explain need for "No Parking, Detour, & Road Closed" signs and include a site plan.
Do you wish to use the front lawn of the Kane County Courthouse on 3 rd St.? <input type="checkbox"/> Yes <input type="checkbox"/> No	Contact Kane County for permission at (630) 232-5973; include documentation of your County approval.

If you would like barricades or traffic cones, please identify the intersection, date and time:			
Intersection	N/S/E/W	Dates	Times

If you are requesting a street closure, please fill in the following information and submit a map along with this application.				
Street Name	From	To	Dates	Times

Are you requesting Police services? <ul style="list-style-type: none"> • Security • Barricades placed? • Crowd control • Street closure • Crossing assistance • Other? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Please provide details here:</i>
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If you would like street crossing assistance, please identify the intersection, date & time:

Across what street	At what cross street	Dates	Times
<i>For ex: Route 38</i>	<i>@ River Lane</i>	<i>5/2/2012</i>	<i>9am - 10:30am</i>

Event Details	Details <i>describe where and why the service is needed, and if indicated on an attached map</i>
Clean Up & Waste Disposal - <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Identify your procedure - who and how.</i>	Contact Elyse at Advance Disposal (City provider) to arrange for special services, (630) 762-7565, or elyse.kowal@advanceddisposal.com
Will you use a tent? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, what is the size of the tent? _____ s.f. Will the tent be on: <input type="checkbox"/> Private Property <input type="checkbox"/> Public Property	<i>Tents larger than 400 s.f. with sidewalls require a permit, per national fire code. Large tents placed into public ROW via "stakes" require tent anchors to be installed in the pavement. <u>NO stakes</u> can be driven into City right-of-way without prior permission from the City of Geneva via a ROW permit. Describe your tent and stake use plans below and indicate where you wish to place the tent on your site diagram in Section N.</i> When will tent be set up? _____ <i>(Please plan for tent set up no earlier than one day prior to the event and tent tear down, within a day of the event)</i> How will tent be secured? <i>(Contact JULIE whenever use of stakes has been approved)</i> <input type="checkbox"/> pop-up <input type="checkbox"/> stakes <input type="checkbox"/> barrels <input type="checkbox"/> weights <input type="checkbox"/> permanent anchors

<p>Will you use a stage? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>If yes, please map on your site diagram in Section N.</i></p>
<p>Is noise control and abatement needed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>By signing this application, you agree to adhere to the City Noise Ordinance, Title 5, Chapter 3.</i></p>
<p>Are you intending to sell merchandise outside? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>If yes, where?</i> <input type="checkbox"/> Is this private property? <input type="checkbox"/> Is this public property?</p>
<p>Are Itinerant or Transient Merchant Licenses needed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>If merchandise is to be sold by any vendor who does not already operate a licensed business in the City (itinerant merchant), or by an existing business operating in a location other than their normal place of business (transient merchant), list these businesses and provide the Illinois Business Tax Number (IBT#) for the business. Please use a separate sheet if necessary. If the list is not yet known, please advise when you will be able to submit to the City.</i></p>
<p>Are connections to the City water utility needed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>Where and for what purpose?</i></p>
<p>Are connections to the City electric utility needed? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>Where and for what purpose?</i></p>
<p>Insurance and bonding arrangements <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>Please attach certificate of insurance naming City of Geneva as additional insured. If not yet available, please advise when you will be able to submit to the City?</i></p> <p>Insurance company name: Address: Phone: Contact:</p>
<p>Have you had any problems or incidents with your event in the past? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>	<p><i>If yes, please explain what actions are being taken to correct the problem for the next event.</i></p>

Fire Protection and Emergency Medical Services	
Will the Fire Department have access to all sites in the event of an emergency? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If not, please provide a contingency plan in the event of an emergency.</i>
Will you be supplying your own First Aid station? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Depending on attendance, the City may require Police and/or Fire personnel at the function. The City shall determine the number of personnel necessary to ensure the safety of participants, minimize the inconvenience to residents, and reduce the public liability exposure to the sponsoring agency as well as the City. The cost for City personnel involved in advance of, during, and after, the day(s) of the event may be charged back to the sponsoring agency.</i>
Will any fire hydrants be obstructed? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, where?</i>

Food and Drink, Health and Sanitation Facilities	
Are you intending to sell or serve food? <i>(If yes, contact the Kane County Health Department)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Where will food be served?	<input type="checkbox"/> Private property? <input type="checkbox"/> Public property? <input type="checkbox"/> Inside <input type="checkbox"/> Outside
Who will prepare the food?	
Have you applied for a permit from the Kane County Health Department? <i>Kane County Health Department, 630-444-3040</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Refuse/Food Waste Disposal <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>Please explain how you will dispose of food related waste including grease and refuse. For any concerns regarding refuse pickup and removal, contact Elyse Kowal of Advanced Disposal at (630)587-8282.</i>
Do you wish to serve alcohol? <input type="checkbox"/> Yes <input type="checkbox"/> No	<i>If yes, attach your complete Liquor License permit for special events along with payment.</i>

SITE PLAN AND/OR ROUTE

N. Site Map to be completed by event organizer. Use this page to provide a diagram of the event. In the space below, please provide the following information (if applicable). Attach additional sheets or maps as needed.

- General map of location
- Street closures /parking
- Information sign locations
- Garbage cans (GC)
- Tents (tent)
- Electrical equipment (Elec)
- Loud speakers (Spkr)
- Bleachers (B)
- Food vendor booths (FV)
- Other business booths (BB)
- Stages (S)
- Toilet sites (T)
- Information booths (Info)
- First Aid Stations (FA)

For tent(s), diagram should show the following:

- Two marked exits with emergency lights
- Seating and table layout
- Electric or heat placement
- Fencing and gates





City of Geneva, Illinois Special Event/Festival Application

Sponsoring Entity Checklist

Please submit your completed/signed Special Event Application to the Economic Development Department. Does your application include the following:

- ___ Event information including your request for city services
- ___ Site plan and/or route
- ___ Certificate of insurance naming the City
- ___ Hold harmless agreement on your organization's letterhead (*sample language attached*)
- ___ Sample waiver used by participants, if applicable

Indicate date you have applied for other approvals (*as needed*):

- ___ Food permit/Kane County Health Department
- ___ County Courthouse Lawn or Government Center Event Permit / Kane County Facilities
Contact: Mary Remiyac, Facilities Manager
719 Batavia Ave., Geneva, IL, 60134
(630) 232-5973
email: remiyacmary@co.kane.il.us, website: www.countyofkane.org

- ___ Raffle license (Kane County Clerk's office)
- ___ Geneva Park District (Geneva Park Facilities)
- ___ Approval for use of Fox Valley Bike Path - through Jim Eby at Batavia Park District
- ___ IL Department of Transportation (State route street closure requests)
- ___ Kane County Department of Transportation (street closure requests, outside of City)

Indicate date you have applied for any required permits/licenses (*code section is noted*):

- ___ **Carnival License** Title 4, Chapter 4, Section 4-4-6 – Carnivals and Amusement Rides
- ___ **Temporary Outdoor Sales of Beer and Wine or Special Event Liquor License** Title 4, Chapter 2
- ___ **Tent License** Title 10, Chapter 4, Fire Prevention and Safety
- ___ **Sign/Banner** Title 10, Chapter 5, Signs
- ___ **Itinerant Merchant /Transient Merchant License** Title 4, Chapter 9
- ___ **Horse Carriage, Wagon, and Trolley** Title 4

Applicants Statement of Agreement:

I hereby affirm that the above information is true and correct in describing the intent of this application. I have read, understand, and agree to abide by the rules and regulations included in this application including the instruction section of this application. The permit, if granted, is not transferable and is revocable at any time at the absolute discretion of the City of Geneva. I understand that the issuance of the special event permit is contingent upon compliance of all conditions, requirements, and City codes. Further, I understand that the City of Geneva, upon direction of the City Administrator or designee may rescind permission to hold any or all portions of a special event within the City if in his/her judgment it is in the public's best interest to do so.

I, _____ the undersigned, agree to abide by the provisions in this application and the instructions attached hereto.

Date: _____ Signature of applicant _____

***This event will be placed on an agenda; will you be in attendance to address the Council? Yes No