

CITY OF ST CHARLES
SPECIAL EVENT APPLICATION
THIS FORM MUST BE COMPLETED IN
FULL & SUBMITTED 90 or 30 DAYS PRIOR TO THE EVENT



Permit No. _____ Date of Meeting: _____ Revised date 06/06/2018

Name of the Event: _____ Date(s) of Event: _____

Special Event Application – 90 Days

The Special Event Application is due to the City of St. Charles a minimum of ninety (90) days prior to the event if it requires closure of public streets, use of public parking lots, or the service of alcoholic beverages that requires a liquor license to be granted. The 90-day time period allows sufficient time to evaluate the request and provide a recommendation to the City Council for its consideration.

Special Event Application – 30 Days

The Special Event Application is due to the City of St. Charles, at a minimum, thirty (30) days prior to the event if it does not require closure of public streets, use of public parking lots, or the service of alcoholic beverages that requires a liquor license to be granted.

A copy of the Application and Funding of Special Events is attached for your information.

Special Event Submittal Check List

- **Special Event Application**
 - Section 1 – Task List and Due Dates –90 day or 30 day submittal
 - Section 2 – General Information
 - Section 3 – Permits
 - Section 4 – Site Plan and/or Route Map
 - Section 5– Emergency Phone Tree and Contact
 - Section 6 – Emergency Crisis Management Procedures
 - Section 7 – Retail Merchants
 - Section 8 – St. Charles Police Department – Request for Police Services
 - Section 9 – Hold Harmless Agreement
 - Any outstanding funds owed to the City of St. Charles**
- Application(s) for other permit(s) (See answers in Section 3)**
 - Loudspeaker/Amplifier License Application and Submittal Fee
 - \$5 per day**
 - Class E Liquor License Application and Submittal Fee
 - \$50 per day** – E-1 (Not-for-Profit)
 - \$100 per day** – E-2 (Special Civic Event)
 - Carnival License Application and Submittal Fee
 - \$30 each** – Rides
 - \$20 each** – Amusement Stands, Food Stands, Entertainment Shows, Other

If your event takes place in downtown St. Charles you are to complete an application through the St. Charles Downtown Partnership.

Received: _____	Fee Paid: \$ _____
Receipt # _____	Check # _____

SECTION 1 - 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 for Events that require 90 days (All items due to City unless noted)	Days Due Before Event	Due Date
Date of the Special Event	- N/A -	
If event takes place in downtown St. Charles you are to complete an application through the St. Charles Downtown Partnership.	120 days	
Submit Special Event Application	90 days	
Payment of any outstanding funds due to the City of St. Charles	At time of submittal	
Provide verification of organization legal status, i.e. NFP, Partnership, Corporation A copy of 501(C)3 document is to be submitted with application.	At time of submittal	
Submit Class E Liquor License Application	90-days	
Submit Outdoor Sales Permit Application	90-days	
Submit Loudspeaker/Amplifier License Application	90-days	
Submit Raffle Permit Application (Kane & DuPage County)	At time of submittal	
Submit Carnival License Application	90 days	
Submit Fireworks Permit Application	60 days	
Submit Original Certificate of Insurance	21 days	
Submit copies of other required permits	At time of submittal	
Emergency Phone Tree	At time of submittal	
Emergency /Crisis Management Procedures	At time of submittal	
Submit Listing of Participating Retail Merchants/Applicable Food Vendors to Finance Department using Pre-Defined Form in Excel format	14 days	
Notify residents/businesses of special event	14 days	

City Services Requested:			Comments
Police	Yes	No	
Fire/EMS	Yes	No	
EMA	Yes	No	
Public Services	Yes	No	
Electric	Yes	No	
Water	Yes	No	

Other:	Yes	No	
Task to be completed for Events that require 30 days (All items due to City unless noted)		Days Due Before Event	Due Date
Date of the Special Event		- N/A -	
Submit Special Event Application		30 days	
Payment of any outstanding funds due to the City of St. Charles		At time of submittal	
Provide verification of organization legal status, i.e. NFP, Partnership, Corporation A copy of 501(C)3 document is to be submitted with application		At time of submittal	
Submit Raffle Permit Application (Kane & DuPage County)		At time of submittal	
Submit Outdoor Sales Permit Application		At time of submittal	
Submit Original Certificate of Insurance		21 days	
Submit copies of other required permits		At time of submittal	
Emergency Phone Tree		At time of submittal	
Emergency /Crisis Management Procedures		At time of submittal	
Submit Listing of Participating Retail Merchants/Applicable Food Vendors to Finance Department using Pre-Defined Form in Excel format		14 days	
Notify residents/business of special event		14 days	

City Services Requested:			Comments
Police	Yes	No	
Fire/EMS	Yes	No	
EMA	Yes	No	
Public Services	Yes	No	
Electric	Yes	No	
Water	Yes	No	
Other:	Yes	No	

SECTION 2 – GENERAL INFORMATION Permit No. _____

Name of Event: _____

Type of Event: ___ Parade ___ Walk/Run/Bike ___ Festival ___ Other

Location of Event: _____

Date(s) of Event: _____ Hours of Event: _____ to _____ Estimated Attendance: _____

Event Website: _____

Purpose of the event: _____

Name of sponsoring organization(s): _____

Please list the organization’s legal status (i.e. NFP, Partnership, and Corporation) : **A copy of the 501(C)3 document is to be submitted with application.**

(Documentation will need to be submitted providing status)

Type of Entity	Check Box that Applies	City Supporting - Existing Event	City Support – New Event
Governmental Entity		100%	100%
Private/For Profit Entity		0%	0%
Non-Governmental/Non-Profit Entity		50%	0%

Contact person from sponsoring organization: _____

Organizer address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Cell Phone: _____ E-mail: _____

Second contact person (emergency): _____ Phone: _____

Is this an annual event? YES NO If yes, please provide event date(s) for next year: _____

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

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

SECTION 3 - PERMITS

Will you be having a fireworks display are your event? YES NO

If yes, you have to submit a **Fireworks Permit Application** sixty (60) days prior to the event. Please contact the St. Charles Fire Department to complete the application.

Does your event include the use of a tent? YES NO

If yes, you must submit an **Outdoor Sales Permit Application** ninety (90) days prior to the event. Please visit www.stcharlesil.gov, or contact Building and Code Enforcement to obtain an outdoor sale permit application.

Will you be using speakers and/or sound equipment at your event? YES NO

If yes, you must submit a **Loudspeaker/Amplifier License Application** ninety (90) days prior to the event. Please visit www.stcharlesil.gov, or contact the Mayor's Office to obtain a loudspeaker/amplifier license application.

Are you holding a raffle at your event? YES NO

If yes, you may have to submit a **Raffle Permit Application**. For the raffle permit application for Kane County, please visit www.co.kane.il.us/COC, or contact the Kane County Clerk's Office at 630.232.5950. For the raffle permit application for DuPage County, please visit http://www.dupageco.org/countyclerk/generic.cfm?doc_id=631 or contact the DuPage County Clerk's Office at 630-407-5500.

Will you serve alcohol at your event? YES NO

If yes, you must submit **Class E Liquor License Application** ninety (90) days prior to the event. Please visit www.stcharlesil.gov, or contact the Mayor's Office to obtain a Class E liquor license application.

Will there be amusement rides at the event? YES NO

If yes, you must submit **Carnival License Application** ninety (90) days prior to the event. Please visit www.stcharlesil.gov or contact the Mayor's Office to obtain a carnival license application.

Will you serve food at your event? YES NO

If yes, please indicate the number of vendors _____

Note: A list of food vendors must be submitted prior to the inspection of your event.

Are you requesting the use of any other city-owned property, i.e. parking lots, etc.? YES NO

If yes, please indicate the property that you are requesting to use.

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:

Will a drone be used? YES NO

If yes, please fill in the name of the pilot: _____

STREET	FROM	TO	DATES	TIMES
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Does your event require the use of city sidewalks? YES NO

Does your event require temporary electric service? YES NO

- If yes, please indicate location(s) electric is needed on next sheet.

Does your event require temporary water/hydrant meter? ? YES NO

- If yes, please indicate locations(s) for hydrant meter(s) on next sheet.

SECTION 4 - SITE PLAN AND/OR ROUTE MAP

Please use the space below to illustrate the layout for your event. If you need additional space, please attach a separate sheet.

If applicable, the following must be included:

Location of food vendors (FV)

Location of beverage vendors (BV)

Location of garbage receptacles (G)

Location of toilets (T)

Location of hand washing sinks (HWS)

Location of retail merchants (RM)

Location of First Aid (FA)

Location and number of barricades (B)

Location of fire lane (FL)

Location of fire extinguishers (FE)

Public entrances and exits (PE)

Location of sound stages and amplified sound (S)

Location of residential streets surrounding events

Electric (E)

(Hydrant Meter (H20)

Section 5 – Emergency Phone Tree

Please use the space below to illustrate the Emergency Phone Tree for your event or submit a separate form detailing your Emergency Phone Tree. If you need additional space, please attach a separate sheet.

Event Title _____ **Date(s) of Event** _____

Emergency Contact Information

Primary Contact: _____ **Secondary Contact:** _____

Title: _____ **Title:** _____

Phone No: _____ **Phone no.:** _____

Tertiary Contact: _____ **Operations Manager:** _____

Title: _____ **Title:** _____

Phone No: _____ **Phone no.:** _____

Site Managers and miscellaneous contacts

Location: _____ **Location:** _____

Date(s): _____ **Date(s):** _____

Name: _____ **Name:** _____

Phone # _____ **Phone #:** _____

Location: _____ **Location:** _____

Date(s): _____ **Date(s):** _____

Name: _____ **Name:** _____

Phone # _____ **Phone #** _____

Location: _____ **Location:** _____

Date(s): _____ **Date(s):** _____

Name: _____ **Name:** _____

Phone #: _____ **Phone #** _____

Section 6– Emergency or Crisis Management Procedures

Please submit your Emergency or Crisis Management Procedures for your event or use the provided example. If you need additional space, please attach a separate sheet.

Emergency/Crisis Management Procedures

1. In the case of any incident, accident or anything deemed “out of the ordinary” (including inclement weather and its potential affects on patrons, property and/or equipment). _____ has designated _____ with the responsibility of being the CRISIS MANAGER (CM). This position will empower the designated person to make decisions on behalf of _____, coordinate with local authorities for an action plan and to make any statements to the press (if applicable).

2. In the case of any incident, accident or anything deemed “out of the ordinary” (including *inclement weather and its potential affects on patrons, property and/or equipment*) ALL _____ staff will be instructed to:
 - a. *Act as quickly and professionally as possible;*
 - b. *To contact their immediate supervisor and/or the on-site _____ management representative;*
 - c. Have as much factual information available as possible – not to speculate as to the cause of the incident, accident, etc., unless requested by the CM;
 - d. Follow the directions of the immediate supervisor and/or the on-site _____ management representative explicitly;
 - e. Recommend that people leave the area first, or at the very least go to their vehicles. If unable to evacuate (staff, disabled, families, etc.) use the lower levels of the parking decks. (West Side, Walnut Street & 1st Street), (East Side, Walnut Avenue & 3rd Avenue). In the event of Tornado Warnings on Saturday and Sunday, Park District staff will open the Pottawatomie Park Community Center so people can seek shelter there, if desired;
If at a location with food, vendors and/or ride operators: turn off all power, gas and grills so unattended energy sources do not catch on fire.

3. These steps should be taken immediately following any incident/accident:
 - a. Get medical help to the parties involved (if applicable);
 - b. Work with sound/announcer, lighting, etc. to inform the patrons of necessary information and/or divert the patron’s attention;
 - c. Resume scheduled activity as soon as possible (subject to #5 below);
 - d. Call the police or other authorities and report any accident;
 - e. Identify witnesses to the incident to obtain statements if necessary;
 - f. Contact a Site Manager for an Incident Report.

4. The CM will communicate to all staff, volunteers, and other personnel that all communication with the press, police, or any other authority will be handled solely by the CM. Police may request information from event personnel and everyone associated with _____ will cooperate with the police department. We will not interfere with police investigations and/or action plans and we will provide the police with materials available upon their request. Any and all materials requested should not be given out until copies of all information can be reproduced for _____.

5. The CM will consult with the local authorities. If it is determined conditions are so extreme the festival cannot continue, the CM will consult with _____ to discuss alternatives.

6. An official statement will be written and given to the CM as soon as it can be formulated by _____ management. No personnel or staff should offer any information to any

media other than the provided statement. No media questions should be answered unless otherwise instructed.

7. Always remember to follow these guidelines:
 - a. Keep as cool and calm as possible;
 - b. Cooperate fully with the authorities. Be as accurate as possible, don't speculate with anyone, including _____ personnel;
 - c. Direct any and all media questions to CM, and only read official statements prepared by _____ Management;
 - d. Use common sense. Think before you act, and always be professional;
 - e. Fill out a Festival Incident Report as accurately as possible;
 - f. Get a copy of the Incident Report from the police and a report from the hospital (if applicable).

Additional Notes:

SECTION 7 – RETAIL MERCHANTS

It is the responsibility of the event organizer to ensure that all participating retail merchants are properly collecting, reporting and filing City sales taxes from sales generated at the event, in accordance with State Statutes. The City's current sales tax rate is 8%. Sales tax collections and forms are to be submitted to the State and not the City. For further information on how and where tax payments are to be submitted, please contact the Illinois Department of Revenue Registration Office at 1-800-732-8866.

Please answer the following question regarding the use of retail merchants in conjunction with your event:

Will your event include:

- Merchants selling retail merchandise? YES: _____ NO: _____
- Food and/or beverages for immediate consumption? YES: _____ NO: _____

If no, no further action is necessary.

If yes to either, you must provide a list of all participating vendors, including business name, address and State IBT number to the City's Finance Department within 14 days of the event. A sample form in Excel format will be emailed to the event organizer's email address. In addition, you must read and sign the following certification:

I understand that it is my responsibility to ensure that all retail merchants and/or food and beverage vendors participating in this event are aware of the rules and requirements for properly collecting and remitting any City sales taxes generated from sales at this event. I will provide the City with a complete listing of all merchants, including their name, address and State IBT number, within 14 days of the event.

Signature: _____

Date: _____

Name: _____

Title: _____

SECTION 8 – St. Charles Police Department – Request for Police Services



ST. CHARLES POLICE DEPARTMENT

REQUEST FOR POLICE SERVICES

DATE SUBMITTED: _____

Individual Requesting Services _____

Home Telephone _____

Person/Organization to be Billed _____

Business Telephone _____

Address _____

Cell Phone _____

City/State/Zip Code _____

Signature _____

St. Charles PD has the authority to determine the number of officers needed based on the circumstances and conditions of the event. I hereby agree to reimburse the city of St. Charles for all compensation paid to its officers for the services and at the rates described above.

Signature of Person Agreeing to Pay _____

TYPE OF EVENT: _____

LOCATION: _____

DATE(S)	TIME(S)	NUMBER OF OFFICERS REQUESTED
	to	
	to	
	to	
	to	

HOURLY RATE – TIME & 1/2
NUMBER EXPECTED TO ATTEND _____

***** DO NOT WRITE BELOW THIS SPACE *****

APPROVED: _____ DISAPPROVED: _____ DATE: _____

Comments: _____

Approved By: _____

OFFICER SIGNUP SECTION HOURLY RATE – TIME & 1/2

DATE	TIME	OFFICERS REQUESTED	NAME	NAME
	to			
	to			
	to			
	to			
	to			
	to			
	to			

Billing to City of St. Charles

Verified by: _____ Date: _____

SECTION 9 – INDEMNIFICATION/HOLD HARMLESS

In consideration of the City of St. Charles permitting the _____
(“Organization”) to conduct _____ (“Event”), the Organization
(name of organization)
(name of event)
recognizes, acknowledges and assumes any and all risks arising from or in any way
related to the Event.

To the fullest extent permitted by law, the Organization hereby agrees to defend,
indemnify and hold harmless the City of St. Charles, its officers, officials, employees and
agents from and against all injuries, deaths, losses, damages, claims, suits, liabilities,
judgments, cost, and expenses (including all attorney’s fees and costs), arising from, or
resulting from or in any way related, directly and/or indirectly to the Event, except that
arising out of the sole legal cause of the City of St. Charles, its officers, officials,
employees and agents.

The Organization shall, at its own expense, appear, defend and pay all charges of
attorneys and all costs and other expenses arising there from or incurred in connection
therewith, and, if any judgment shall be rendered against the City of St. Charles, its
officers, officials, employees and/or agents, in any such action, the Organization at its
own expense shall satisfy and discharge same.

The invalidity of any provision(s) of this INDEMNIFICATION/HOLD
HARMLESS or unenforceability of any of its provisions shall not affect the validity or
enforceability of the remainder of this INDEMNIFICATION/HOLD HARMLESS.

The Organization and the authorized signatory below warrant and represent that
the authorized signatory below has full authority to execute and submit this application,
including, but not by way of limitation, the INDEMNIFICATION/HOLD HARMLESS

provisions contained herein.

The Organization and the authorized signatory below agree to inform the City of St. Charles of any changes in the application at least thirty (30) days prior to the event.

(Name of Organization)

(Date)

by _____
Authorized Signatory

Signed and sworn to before me this _____ day of _____, 201____.

Notary Public

All applications must be signed and notarized.

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 and scheduling of other events.**

The City of St. Charles 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 St. Charles
Attn: The St. Charles Police Department
1515 W. Main Street
St. Charles, IL 60174