


AGENDA
CITY OF ST. CHARLES
GOVERNMENT OPERATIONS COMMITTEE
ALD. TODD BANCROFT, CHAIR
MONDAY, MAY 21, 2018
IMMEDIATELY FOLLOWING THE CITY COUNCIL MEETING
CITY COUNCIL CHAMBERS – 2 EAST MAIN STREET

- 1. Call to Order**
- 2. Roll Call**
- 3. Omnibus Vote**
- 4. Police Department**
 - a. Recommendation to Approve a Proposal for a New Class E-1 Temporary Liquor License for a Special Event, a Random Acts Matter Fundraiser, to be held in Mt. St. Mary's Park.
 - b. Recommendation to approve a Proposal for a New Class E-1 Temporary Liquor License for a Special Event, "Sunset Cider Stroll" to be held Downtown St. Charles and Mt. St. Mary's Park.
 - c. Recommendation to approve an Ordinance Amending Title 5, Entitled "Business Licenses and Regulations" Chapter 5.08, "Alcoholic Beverages", 5.08.090, "License - Classifications", 5.08.150, "License – Cessation of Business – Revocation of Licenses – Reduction in Licenses" of the St. Charles Municipal Code.
 - d. Recommendation to approve a Proposal for a New Class E-8 Liquor License for the St. Charles History Museum, located at 215 E Main Street, St. Charles.
- 5. Finance Department**
 - a. Recommendation to approve an Ordinance Ascertaining Prevailing Wages in the City of St. Charles for Kane and DuPage Counties.
 - b. Recommendation to Appoint Assurance Agency as the City's Risk Insurance Consultant and Broker at a Cost of \$32,500 Annually for the Five Annual Renewal Periods Beginning December 1, 2018
 - c. Recommendation to approve Funds Transfer Resolutions Authorizing Budgeted Transfers in the Aggregate Amount of \$2,652,427.73 for Miscellaneous Transfers.
- 6. Executive Session**
 - Personnel – 5 ILCS 120/2(c)(1)
 - Pending Litigation – 5 ILCS 120/2(c)(11)
 - Probable or Imminent Litigation – 5 ILCS 120/2(c)(11)
 - Property Acquisition – 5 ILCS 120/2(c)(5)
 - Collective Bargaining – 5 ILCS 120/2(c)(2)
 - Review of Executive Session Minutes – 5 ILCS 120/2(c)(21)
- 7. Additional Items from Mayor, Council, Staff, or Citizens.**
- 8. Adjournment**

ADA Compliance

Any individual with a disability requesting a reasonable accommodation in order to participate in a public meeting should contact the ADA Coordinator, Jennifer McMahon, at least 48 hours in advance of the scheduled meeting. The ADA Coordinator can be reached in person at 2 East Main Street, St. Charles, IL, via telephone at (630) 377 4446 or 800 526 0844 (TDD), or via e-mail at jmcmahon@stcharlesil.gov. Every effort will be made to allow for meeting participation. Notices of this meeting were posted consistent with the requirements of 5 ILCS 120/1 et seq. (Open Meetings Act).

	AGENDA ITEM EXECUTIVE SUMMARY		Agenda Item number: 4a
	Title:	Recommendation to Approve a Proposal for a New Class E-1 Temporary Liquor License for a Special Event, a Random Acts Matter Fundraiser, to be held in Mt. St. Mary's Park	
	Presenter:	Jim Keegan, Police Chief	
Meeting: Government Operations Committee		Date: May 21, 2018	
Proposed Cost: \$		Budgeted Amount: \$	Not Budgeted: <input type="checkbox"/>
Executive Summary <i>(if not budgeted please explain):</i> <p>This is an application request for a Class E-1 Temporary License, authorizing for consumption of wine and beer on City property, specifically, in Mt. St. Mary's Park. This temporary license request is for Sunday, September 9, 2018 from 3:00 to 7:00 p.m.</p> <p>This is the second year for this request. No issues were reported regarding this event last year. St. Charles Park District approval has been granted for this event.</p> <p>This is a family event. Several local music groups will perform throughout the event. Participants must pre-register for this event – all food and alcohol will be pre-purchased. Upon check-in, all participants who are 21 and older will be given wrist bands. Fencing will be installed around the entire area, which has been mutually agreed on with the event organizer and the Park District so that participants can consume wine and beer within the fenced-in area. Approximately 450 participants are expected for this event.</p> <p>This event is being organized by a 501C3 and the reduced fees for City services are being requested for this event.</p> <p><i>Pursuant to this item being presented at the Government Operations Committee meeting on Monday, May 21, 2018 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled at 4:30 p.m., the same day, to process and move it forward to this Committee. This item will then continue on to the City Council meeting scheduled on June 4, 2018 for final approval.</i></p>			
Attachments <i>(please list):</i> E1 Liquor License Application COI (liquor liability) Special Event Application Site Plan Hold Harmless Form Loudspeaker License Application			
Recommendation/Suggested Action <i>(briefly explain):</i> Recommendation to approve at proposal for a new Class E-1 temporary liquor license for a special event – a Random Acts Matter fundraiser - to be held in downtown St. Charles and Mt. St. Mary's Park.			

For Office Use

Received:
Fee Paid: \$
Receipt #

NON-REFUNDABLE
CITY OF ST. CHARLES
TWO EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174-1984



CITY LIQUOR DEALER LICENSE APPLICATION
CLASS E1 – NOT-FOR-PROFIT LICENSE
CLASS E3 – KANE COUNTY FAIR

Pursuant to the provisions of Chapter 5.08, Alcoholic Beverages, of the City of St. Charles Municipal Code regulating the sale of alcoholic liquors in the City of St. Charles, State of Illinois and all amendments thereto now in force and effect.

The undersigned hereby makes application for a Liquor Dealer License, Class E1 – Not-For-Profit License or E3 – Kane County Fair
Commencing September 9 and ending September 9
Time Starting 10:00 AM and ending 10:00 PM
Location of Event ST MARYS PARK

Name of Business RAM RESTAURANT GROUP
Address of Business 11 N 3rd Street Business Phone 630-377-0797
Is the Applicant a Not-For-Profit Organization? RANDOM ACTS MATTER
Authorized Agent Rob Mondri Title PRESIDENT
Has Applicant had a Class E1 License in the previous 365 days? YES If YES, on what date: Since 2015
Does Applicant have Dram Shop Insurance? yes If YES, attach evidence of insurance. COUNTRY INSURANCE

Requirements of a Class E1 / E3 – Not-For-Profit License

1. The Class E1 license fee is \$50.00 per day.
2. A minimum of three (3) liquor supervisors shall monitor liquor service during all times of operation. **Please provide a list of all supervisors with this application.**
3. Liquor supervisors shall be members of the organization holding the license.
4. Beer and/or Wine are the only alcoholic beverages to be sold.
5. Hours are restricted to 12 noon to 11:00 p.m.
6. Licensee must rope/fence off the licensed premises.
7. Are children/minors permitted in the licensed premises? **Y/N**
8. Each patron **must wear a wristband** after having identification checked for legal alcohol consumption age.
9. A sign limited beer and/or wine consumption to the roped off area must be conspicuously displayed at all times.
10. **Each server of alcohol must be BASSET certified – need copy of BASSET certification.**
11. A copy of site plan diagram to include roped area shall accompany this application.
12. All security/police resources needed shall be attached to this application with approval of the Chief of Police before final issuance by Liquor Commissioner.

Affidavit

State of Illinois)
County of Kane)

I/We, the undersigned, being first duly sworn, say that I/we have read the foregoing application and that the statements therein are true, complete, and correct and are upon my/our personal knowledge and information and are made for the purpose of inducing the City of St. Charles to issue the Liquor Dealer License, Class E1 to me/us for the location hereinbefore indicated; that I/we will not violate any of the laws of the United States, the State of Illinois or the City Ordinances of the City of St. Charles.

Signed: [Signature] Signed: _____
Sworn to before me this 9 day of May, 2018.
Notary Public Tracey R. Conti



ENDORSEMENT OF THE LIQUOR CONTROL COMMISSIONER

Approved: [Signature] Date: 5-9-18 Chief of Police: [Signature]
Approved: _____ Date: _____ Liquor Commissioner: _____



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

2/26/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER DONNA A TONOVITZ (16137) 1118 E MAIN ST SUITE 1A ST CHARLES, IL 60174-0000	CONTACT NAME: DONNA A TONOVITZ PHONE (A/C, No, Ext): 630-549-7694 E-MAIL ADDRESS: DONNA.TONOVITZ@COUNTRYFINANCIAL.COM FAX (A/C, No): 630-549-7698
INSURED 4351408 RAM RESTAURANT GROUP INC 11 N 3RD ST ST CHARLES, IL 60174	INSURER(S) AFFORDING COVERAGE INSURER A: COUNTRY Mutual Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
	NAIC # 20990

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> BUSINESSOWNERS GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC			AM9236877	3/5/2018	3/5/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 \$
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS Covered on Businessowners			AM9236877	3/5/2018	3/5/2019	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$ 10,000			AU9236471	3/5/2018	3/5/2019	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000 \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A						WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	LIQUOR LIABILITY			AM9236877	3/5/2018	3/5/2019	Each Person BI Limit \$ 0 AGGREGATE \$ 2,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

POLICY INFORMATION:

Each Person Property Damage Limit and Loss Of Means of Support or Loss of Society Limit are included in Liquor Liability Coverage and subject to Illinois Statute

HIRED AUTOS LIMIT AND NON-OWNED AUTOS LIMIT ARE \$100,000 EACH OCCURRENCE SUBJECT TO A \$100,000 AGGREGATE LIMIT
(CONTINUED)

CERTIFICATE HOLDER**CANCELLATION**

STATE OF ILLINOIS
100 WEST RANDOLPH ST
SUITE 7-801
CHICAGO, IL 60601

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

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RECEIVED
APR 18 2018

Building & Code Enforcement
St. Charles, IL

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. 1827547

Date of Meeting: 120 DMG 4/24/18 9:30AM

Revised date 06/07/2017

Name of the Event: An Evening of Random Acts

Date(s) of Event: 9/9/18

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– Hold Harmless Agreement
- ☐ Any outstanding funds owed to the City of St. Charles

Application(s) for other permit(s) (See answers in Section 3)

- ☒ Outdoor Sales/Event Permit Application and Submittal Fee
- ☒ \$65
- ☒ Loudspeaker/Amplifier License Application and Submittal Fee
- ☒ \$5 per day pd - 4-18-18
- ☒ 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.

Would you like to be contacted by the Convention and Visitor's Bureau to help with your event?
(Finding event space, restaurants, caterers, suppliers, etc.)

Please mark Yes ☐ No ☐

If you marked yes please let the Convention and Visitor's Bureau know the best way to contact you:

Phone:

Email:

Received: 4-18-2018

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 <u>90 days</u> (All items due to City unless noted)	Days Due Before Event	Due Date
Date of the Special Event	- N/A -	9/9/18
If event takes place in downtown St. Charles you are to complete an application through the St. Charles Downtown Partnership.	120 days	N/A
Submit Special Event Application	90 days	4-18-18
Payment of any outstanding funds due to the City of St. Charles	At time of submittal	4-18-18
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	4-18-18
Submit Class E Liquor License Application	90-days	
Submit Outdoor Sales Permit Application	90-days	N-A
Submit Loudspeaker/Amplifier License Application	90-days	4-18-18
Submit Raffle Permit Application (Kane & DuPage County)	At time of submittal	
Submit Carnival License Application	90 days	N-A
Submit Fireworks Permit Application	60 days	N-A
Submit Original Certificate of Insurance	21 days	4-19-18
Submit copies of other required permits	At time of submittal	
Emergency Phone Tree	At time of submittal	4-18-18
Emergency /Crisis Management Procedures	At time of submittal	4-18-18
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	<input checked="" type="checkbox"/> Yes	No	Security
Fire/EMS	Yes	No	
EMA	Yes	No	
Public Services	Yes	No	
Electric	<input checked="" type="checkbox"/> Yes	No	
Water	Yes	No	
Other:	Yes	No	

SECTION 2 – GENERAL INFORMATION

Permit No.

18-27547

Name of Event:

An Evening of Random Acts

Type of Event:

☐ Parade☐ Walk/Run/Bike☐ Festival☒ Other

Location of Event:

Mt. St. Marys Park

Date(s) of Event:

9/9/18

Hours of Event:

3 to 7

Estimated Attendance:

450

Event Website:

www-randomactsmatter.com

Purpose of the event:

Fundraiser for Random Acts Matters

Name of sponsoring organization(s):

Random Acts Matter (RAM)

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	<input checked="" type="checkbox"/>	0%	0%
Non-Governmental/Non-Profit Entity		50%	0%

Contact person from sponsoring organization:

Lori Georgeson

Organizer address:

RAM 7 E. Main Street, Suite 101, St Charles IL 60174

City:

email: Randomactsmatter@gmail.com

State:

Zip:

Home Phone:

Cell Phone:

il:

Second contact person (emergency):

Sherri Smith

Is this an annual event?



YES



NO

If yes, please provide event date(s) for next year:

Unknown

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.

But food is pre ordered + Brought in
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.

Adjacent public streets, parking near St Mary's, downtown garages

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
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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.

as provided at park - By gazebo

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.

See attached

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)

Trail Map



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

An Evening of Random Act

Date(s) of Event

9/9/18

Emergency Contact Information

Primary Contact:

Jim Di Ciaula

Secondary Contact:

Lori Georgeson

Title:

President - RAM

Title:

Event Co-chair

Phone n

[Redacted]

Phone no.:

[Redacted]

Tertiary Contact:

Sherri Smith

Operations manager:

Title:

Event Co-chair

Title:

Phone no

[Redacted]

Phone no.:

Site Managers and miscellaneous contacts

Location:

Location:

Date(s):

Date(s):

Name:

Name:

Phone no.:

Phone no.:

Location:

Location:

Date(s):

Date(s):

Name:

Name:

Phone no.:

Phone no.:

Location:

Location:

Date(s):

Date(s):

Name:

Name:

Phone no.:

Phone no.:

Example

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). *RAM Jim DiCicciola* has designated *Jim DiCicciola* with the responsibility of being the CRISIS MANAGER (CM). This position will empower the designated person to make decisions on behalf of *An Evening of Landmark*, 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 RAM* staff will be instructed to:

- Act as quickly and professionally as possible;
- To contact their immediate supervisor and/or the on-site *Co-chairs -* management representative;
- 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;
- Follow the directions of the immediate supervisor and/or the on-site *RAM* management representative explicitly;
- 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:
- Get medical help to the parties involved (if applicable);
 - Work with sound/announcer, lighting, etc. to inform the patrons of necessary information and/or divert the patron's attention;
 - Resume scheduled activity as soon as possible (subject to #5 below);
 - Call the police or other authorities and report any accident;
 - Identify witnesses to the incident to obtain statements if necessary;
 - 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

RAM 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 RAM 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 RAM personnel;
 - c. Direct any and all media questions to CM, and only read official statements prepared by RAM 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.

All food being brought in by guests

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: *Lori Georgison*

Date: *4/18/18*

Name: *Lori Georgison*

Title: *RAM, Vice-President*
Event Co Chair

SECTION 8 – INDEMNIFICATION/HOLD HARMLESS

In consideration of the City of St. Charles permitting the Random Acts Matter
("Organization") to conduct An Evening of Random Acts ("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.

Random Acts Matter
(Name of Organization)

4/18/18
(Date)

by Jim Jones
Authorized Signatory

Signed and sworn to before me this 18 day of April, 2018.

Adrienne L. Sivert
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: Building & Code Enforcement
2 E. Main Street
St. Charles, IL 60174

CITY OF ST. CHARLES
TWO EAST MAIN STREET
ST. CHARLES, ILLINOIS 60174-1984



DEPARTMENT: BUILDING & CODE ENFORCEMENT

PHONE: 630.377.4406

FAX: 630.443.4638

LOUDSPEAKER/AMPLIFIER LICENSE APPLICATION

Important: this application must be fully and accurately complete.

1. License term: FROM 9/9/18 TO 9/9/18 Number of Days 1
2. Applicant is: ☒ Corporation ☐ Partnership ☐ Individual
3. Applicant's Name Random Acts Matter Telephone # [REDACTED]
D/B/A _____
Address 7E Main St Suite 101 City/State/Zip St Charles IL 60174
4. Device Owner's Name _____ Telephone # _____
Address _____ City/State/Zip _____
5. Device(s) to be used, specific to power amplification (wattage) and output:
TBD Donated
6. Area where device(s) is/are to be used:
Near gazebo - in Mt St Mary's Park
7. Amplification system will be used for:
☒ Music
☒ Public Speaking
☐ Other (describe) _____
8. If used for music, what type (include name of artist/band if applicable):
* Local High Schools
* ThruLife
* other music groups - TBD

9. Time of day device(s) is/are to be used: 2:30 - 9 p m

By signing this application, the applicant agrees to all the provisions of Chapter 9.24 of the City of St. Charles Municipal Code.

Applicant

Jim Hagan
Signature

The fee for such a license will be \$5.00 per day, payable when the application is submitted for review. The city's police chief will reserve the right to review the application, and in conjunction with the Public Health and Safety Committee, either approve or deny the license request.

Approved: _____

Denied: _____

by: _____

Chief of Police

For Office Use

Date Received _____ Fee Paid _____ Receipt No. _____ Permit No. _____



RANDO-1

OP ID: TOM

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

04/18/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER TGM Insurance Agency 314 W. Walnut Street St. Charles, IL 60174 Thomas G. Mollenhauer	630-315-5472	CONTACT NAME: Thomas G. Mollenhauer PHONE (A/C, No, Ext): 630-315-5472 FAX (A/C, No): 630-315-5477 E-MAIL ADDRESS: samnmnm@comcast.net
INSURED Random Acts Matter Jim Di Ciaula 7 E. Main Street, Suite 101 St Charles, IL 60174		INSURER(S) AFFORDING COVERAGE INSURER A: Acuity INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
		NAIC # 14184

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			Z70489	04/30/2018	04/30/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
A	Misc Equipmnet			Z70489	04/30/2017	04/30/2018	Concert Eqt \$ 2,300

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Proof of Insurance**CERTIFICATE HOLDER**

CITYSTC

City of St Charles
2 E. Main Street
St Charles, IL 60174**CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE
Thomas G. Mollenhauer

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 4b

Title:

Recommendation to Approve a Proposal for a New Class E-1 Temporary Liquor License for a Special Event - "Sunset Cider Stroll" - to be held in Downtown St. Charles and Mt. St. Mary's Park

Presenter:

Jim Keegan, Police Chief

Meeting: Government Operations Committee

Date: May 21, 2018

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** (if not budgeted please explain):

This is an application request for a Class E-1 Temporary License, authorizing for consumption of hard cider on City property, specifically, downtown St. Charles and in Mt. St. Mary's Park. This temporary license request is for Friday, September 21, 2018.

This is the first year for this request. St. Charles Park District approval has been granted for this event. Once approved, the Park District will work with downtown businesses to help promote and sponsor this event.

This is a 21 and older event. Participants must pre-register for this event. Upon check-in, all participants will be given wrist bands. All hard cider samples will be provided in roped off areas along the path. Fencing will be installed between the two pavilion areas. The event is expected to end by sunset, or around 7 p.m. Approximately 100 participants are expected for this event.

Pursuant to this item being presented at the Government Operations Committee meeting on Monday, May 21, 2018 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled at 4:30 p.m., the same day, to process and move it forward to this Committee. This item will then continue on to the City Council meeting scheduled on June 4, 2018 for final approval.

Attachments (please list):

E1 Liquor License Application
Certificate of Insurance
Site Plan
Special Event Application
Hold Harmless Form

Recommendation/Suggested Action (briefly explain):

Recommendation to approve at proposal for a new Class E-1 temporary liquor license for a special event - "Sunset Cider Stroll" - to be held in downtown St. Charles and Mt. St. Mary's Park.

For Office Use
 Received:
 Fee Paid: \$
 Receipt #

NON-REFUNDABLE
CITY OF ST. CHARLES
 TWO EAST MAIN STREET
 ST. CHARLES, ILLINOIS 60174-1984



CITY LIQUOR DEALER LICENSE APPLICATION
CLASS E1 – NOT-FOR-PROFIT LICENSE
CLASS E3 – KANE COUNTY FAIR

Pursuant to the provisions of Chapter 5.08, Alcoholic Beverages, of the City of St. Charles Municipal Code regulating the sale of alcoholic liquors in the City of St. Charles, State of Illinois and all amendments thereto now in force and effect.

The undersigned hereby makes application for a Liquor Dealer License, Class E1 – Not-For-Profit License or E3 – Kane County Fair
 Commencing 9/21/2018 and ending 9/21/2018
 Time Starting 5pm and ending 7:30pm
 Location of Event Mount Saint Mary Park

Name of Business St. Charles Park District
 Address of Business 8 North Avenue Business Phone 630-513-6200
 Is the Applicant a Not-For-Profit Organization: Government-local
 Authorized Agent Jennifer Bruggeman Title Asst. Supt of Rec
 Has Applicant had a Class E1 License in the previous 365 days? Y If YES, on what date:
 Does Applicant have Dram Shop Insurance? Y If YES, attach evidence of insurance.

Requirements of a Class E1 / E3 – Not-For-Profit License

1. The Class E1 license fee is \$50.00 per day.
2. A minimum of three (3) liquor supervisors shall monitor liquor service during all times of operation. **Please provide a list of all supervisors with this application.**
3. Liquor supervisors shall be members of the organization holding the license.
4. Beer and/or Wine are the only alcoholic beverages to be sold.
5. Hours are restricted to 12 noon to 11:00 p.m.
6. Licensee must rope/fence off the licensed premises.
7. Are children/minors permitted in the licensed premises? Y/N
8. Each patron **must wear a wristband** after having identification checked for legal alcohol consumption age.
9. A sign limited beer and/or wine consumption to the roped off area must be conspicuously displayed at all times.
10. **Each server of alcohol must be BASSET certified – need copy of BASSET certification.**
11. A copy of site plan diagram to include roped area shall accompany this application.
12. All security/police resources needed shall be attached to this application with approval of the Chief of Police before final issuance by Liquor Commissioner.

Affidavit

State of Illinois)
 County of Kane)

I/We, the undersigned, being first duly sworn, say that I/we have read the foregoing application and that the statements therein are true, complete, and correct and are upon my/our personal knowledge and information and are made for the purpose of inducing the City of St. Charles to issue the Liquor Dealer License, Class E1 to me/us for the location hereinbefore indicated; that I/we will not violate any of the laws of the United States, the State of Illinois or the City Ordinances of the City of St. Charles.

Signed: Jennifer Bruggeman Signed: _____
 Sworn to before me this 20th day of April, 2018.
 Notary Public Deborah L. Graffagna



ENDORSEMENT OF THE LIQUOR CONTROL COMMISSIONER

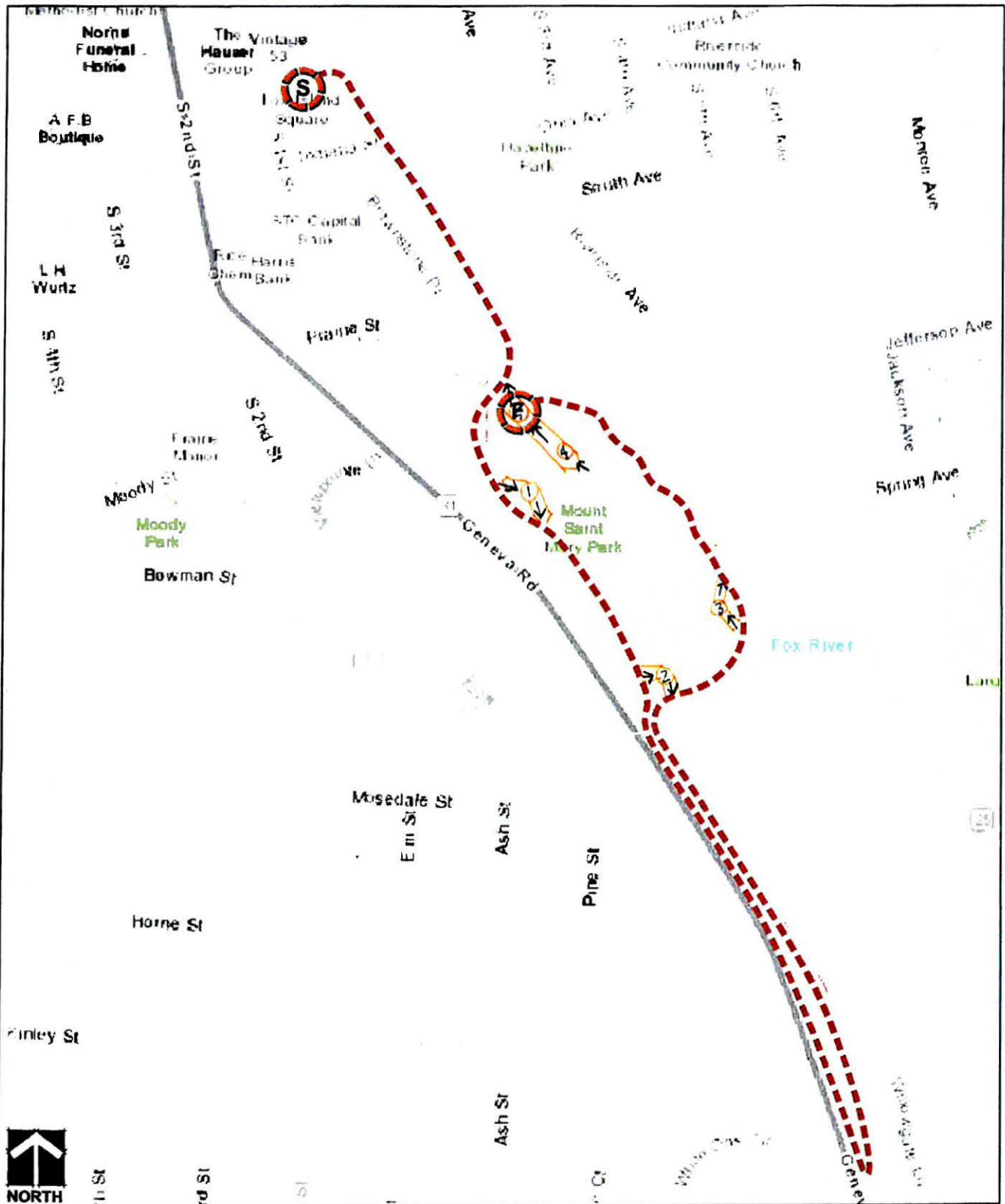
Approved: _____ Date: _____ Chief of Police: _____
 Approved: _____ Date: _____ Liquor Commissioner: _____



EVENT ROUTE

MT. ST. MARY PARK
& SURROUNDING AREA

ST. CHARLES, ILLINOIS



CERTIFICATE OF COVERAGE

Name and Address of Agency

Park District Risk Management Agency
2033 Burlington Avenue
Lisle, Illinois 60532-1646
630-769-0332

Name and Address of Member

St. Charles Park District
101 S. Second Street
Saint Charles, IL 60174
630-513-4310

SCOPE OF COVERAGE

The Park District Risk Management Agency (PDRMA) is an intergovernmental self-insurance and risk management pool established under the constitution and the statutes of the State of Illinois to provide coverage for its members against certain claims and losses. Each member of PDRMA is entitled to the scope and amounts of coverage set forth below. In addition, PDRMA may extend the same scope of coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, and amendments that are applicable to the members.

The above named entity is a member in good standing of the Park District Risk Management Agency. The scope of coverage provided by the agency may, however, be revised at any time by the actions of PDRMA's governing body. As of the date this certificate is issued, the information set out below accurately reflects the scope of coverage established for the current coverage year. **This document may not be used to extend Additional Insured status to the certificate holder or any other individual/organization/entity.**

Scope of Coverage	Coverage Document	Coverage Dates	Limits Each Occurrence	In millions (000,000)
General Liability * Commercial general liability * Occurrence * Liquor liability	L010118	1/1/2018-12/31/2018	Bodily Injury and Property Damage combined	3
			Personal Injury	3
Automobile Liability * any auto	L010118	1/1/2018-12/31/2018	Bodily Injury and Property Damage combined	3
Workers' Compensation	WC010118	1/1/2018-12/31/2018		Statutory
Employer's Liability	WC010118	1/1/2018-12/31/2018		3

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Sunset Cider Stroll 9/21/2018; Downtown St. Charles and Mount Saint Mary Park

Certificate Holder

City of Saint Charles

2 E. Main Street
Saint Charles, IL, 60174
630-377-4400



Authorized Representative

Date Issued: 4/4/2018

© 2015 PDRMA



Receipt

City of St Charles

City of St. Charles
Two East Main St
St. Charles, IL 60174
Phone: (630)
377-4406
Fax: (630) 443-4638

Receipt Date: 04/23/2018

Building Permit Application

PERMIT NUMBER: 18-27569
STATUS: Under Review
PERMIT TYPE: Special Events
DATE APPLIED FOR: 04/20/2018

JOB LOCATION

ADDRESS: 700 S SECOND ST
SUBDIVISION:
BUSINESS NAME SUNSET CIDER STROLL

APPLICANT

NAME: ST CHARLES PARK DISTRICT
WORK PHONE: (630) 703-9002
HOME PHONE: () -

FEES

FEE TYPE	FEE AMOUNT	ACCOUNT CODE	DATE ENTERED	ENTERED BY	INVOICE#
Liquor - Special Events	\$50.00	100999 42104	04/20/2018	BZ Counter	

PAYMENTS

PAYMENT DATE	AMOUNT PAID	PAYMENT TYPE	RECEIVED BY	CHECK NUMBER	PAID BY
--------------	-------------	--------------	-------------	--------------	---------

Totals	
Total Fee	\$50.00
Total Payment	\$0.00
Balance Remaining	\$50.00



Building & Code Enforcement
St. Charles, IL

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. 18-27569 Date of Meeting: Tues 9:00 4/24/18 Revised date 06/07/2017

Name of the Event: Sunset Cider Stroll Date(s) of Event: 9/21/2018

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 – Hold Harmless Agreement
 - ☐ Any outstanding funds owed to the City of St. Charles
- Application(s) for other permit(s) (See answers in Section 3)**
- ☐ Outdoor Sales/Event Permit Application and Submittal Fee
 - ☐ \$65
 - ☐ 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.

Would you like to be contacted by the Convention and Visitor's Bureau to help with your event?
(Finding event space, restaurants, caterers, suppliers, etc.)

Please mark Yes ☐ No ☒

If you marked yes please let the Convention and Visitor's Bureau know the best way to contact you:

Phone: _____ Email: _____

Received: 4/20/2018 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 <u>90 days</u> (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	n/a
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	n/a
Submit Raffle Permit Application (Kane & DuPage County)	At time of submittal	n/a
Submit Carnival License Application	90 days	n/a
Submit Fireworks Permit Application	60 days	n/a
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	

SECTION 2 – GENERAL INFORMATION

Permit No. _____

Name of Event: Sunset Cider StrollType of Event: ☐ Parade ☒ Walk/Run/Bike ☐ Festival ☐ Other 700 S. Second St.Location of Event: Downtown STC through Mount Saint Mary ParkDate(s) of Event: 9/21/18 Hours of Event: 5p to 7p Estimated Attendance: 100Event Website: stcparks.orgPurpose of the event: adult walk and hard cider/food samplingName of sponsoring organization(s): St. Charles Park DistrictPlease 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	<input checked="" type="checkbox"/>	100%	100%
Private/For Profit Entity	<input type="checkbox"/>	0%	0%
Non-Governmental/Non-Profit Entity	<input type="checkbox"/>	50%	0%

Contact person from sponsoring organization: Jennifer BruggemanOrganizer address: 8 North AvenueCity: St. Charles State: IL Zip: 60174Home Phone: work 630-513-4337 Cell Phone: [REDACTED] E-mail: jbruggeman@stcparks.orgSecond contact person (emergency): Katie MillerPh: [REDACTED]Is this an annual event? ☐ YES ☒ NO If yes, please provide event date(s) for next year: _____unknown
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 at 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: approx 4-6

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.

public parking in C10-a few spaces for event start

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
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

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 location(s) for hydrant meter(s) on next sheet.

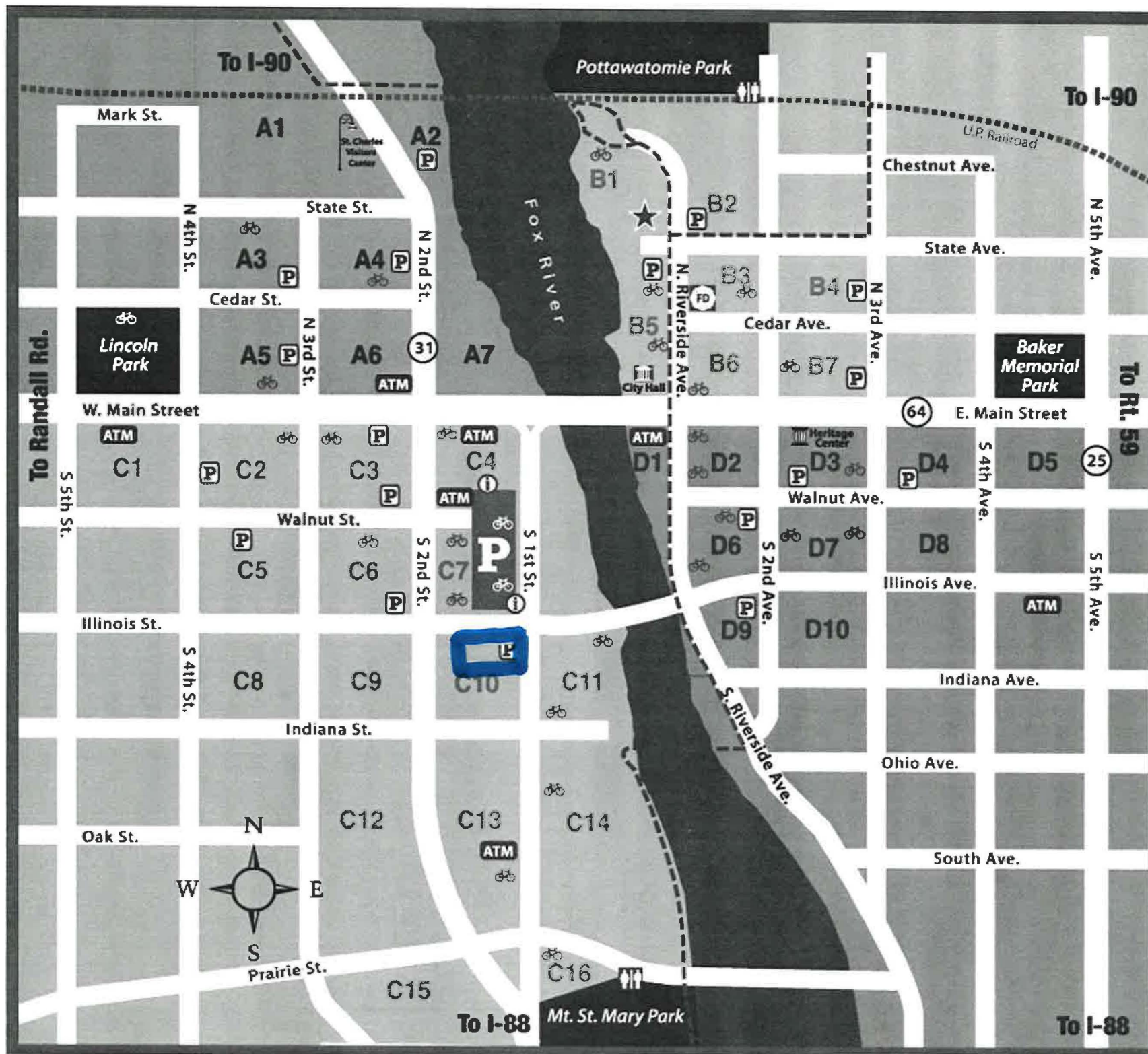
SECTION 4 - SITE PLAN AND/OR ROUTE MAP

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 Sunset Cider Stroll Date(s) of Event 9/21/18

Emergency Contact Information

Primary Contact: Ken Bruggeman Secondary Contact: Katie Miller

Title: Asst Supt of Rec Title: Asst Supt of Rec

Phone No: 630-703-9002 Phone no.: 847-909-7462

Tertiary Contact: Andy Masoncup Operations Manager: _____

Title: Asst Supt of Rec Title: _____

Phone No: 630-669-7751 Phone no.: _____

Site Managers and miscellaneous contacts

Location: 1 Location: 2

Date(s): 9/21/18 Date(s): 9/21/18

Name: Rosie Fasching Name: Melissa Caine

Phone: [REDACTED] Phone #: [REDACTED]

Location: 3 Location: 4

Date(s): 9/21/18 Date(s): 9/21/18

Name: Steve Gard Name: Cayla Greenfield

Phone: [REDACTED] Phone: [REDACTED]

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).
Director Cabel has designated Jennifer Bruggeman with the responsibility of being the CRISIS MANAGER (CM). This position will empower the designated person to make decisions on behalf of Park District 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 Park District staff will be instructed to:
 - a. Act as quickly and professionally as possible;
 - b. To contact their immediate supervisor and/or the on-site Park District 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 Park District 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 Pottawatomic 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

Park District 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 Park District.

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 Director Cabel to discuss alternatives.
6. An official statement will be written and given to the CM as soon as it can be formulated by Park District 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 Park District personnel;
 - c. Direct any and all media questions to CM, and only read official statements prepared by Park District 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: X NO: _____
- Food and/or beverages for immediate consumption? YES: X 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: Jennifer Bruggeman

Date: 3/22/18

Name: Jennifer Bruggeman

Title: Asst. Supt of Rec

SECTION 8 – INDEMNIFICATION/HOLD HARMLESS

In consideration of the City of St. Charles permitting the St. Charles Park District
(“Organization”) to conduct Sunset Cider Stroll (“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.

St. Charles Park District
(Name of Organization)

3/22/2018
(Date)

by Bob Caine
Authorized Signatory

Signed and sworn to before me this 27 day of March, 2018.

Connie J Kurr
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: Building & Code Enforcement
2 E. Main Street
St. Charles, IL 60174

CERTIFICATE OF COVERAGE

Name and Address of Agency

Park District Risk Management Agency
2033 Burlington Avenue
Lisle, Illinois 60532-1646
630-769-0332

Name and Address of Member

St. Charles Park District
101 S. Second Street
Saint Charles, IL 60174
630-513-4310

SCOPE OF COVERAGE

The Park District Risk Management Agency (PDRMA) is an intergovernmental self-insurance and risk management pool established under the constitution and the statutes of the State of Illinois to provide coverage for its members against certain claims and losses. Each member of PDRMA is entitled to the scope and amounts of coverage set forth below. In addition, PDRMA may extend the same scope of coverage to non-members. However, any coverage extended to a non-member is subject to all of the terms, conditions, exclusions, and amendments that are applicable to the members.

The above named entity is a member in good standing of the Park District Risk Management Agency. The scope of coverage provided by the agency may, however, be revised at any time by the actions of PDRMA's governing body. As of the date this certificate is issued, the information set out below accurately reflects the scope of coverage established for the current coverage year. **This document may not be used to extend Additional Insured status to the certificate holder or any other individual/organization/entity.**

Scope of Coverage	Coverage Document	Coverage Dates	Limits Each Occurrence	In millions (000,000)
General Liability * Commercial general liability * Occurrence * Liquor liability	L010118	1/1/2018-12/31/2018	Bodily Injury and Property Damage combined	3
			Personal Injury	3
Automobile Liability * any auto	L010118	1/1/2018-12/31/2018	Bodily Injury and Property Damage combined	3
Workers' Compensation	WC010118	1/1/2018-12/31/2018		Statutory
Employer's Liability	WC010118	1/1/2018-12/31/2018		3

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Sunset Cider Stroll 9/21/2018; Downtown St. Charles and Mount Saint Mary Park

Certificate Holder

City of Saint Charles

2 E. Main Street

Saint Charles, IL, 60174

630-377-4400



Authorized Representative

Date Issued: 4/4/2018

© 2015 PDRMA

CERTIFICATE OF COVERAGE

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Park District Risk Management Agency
2033 Burlington Avenue
Lisle, Illinois 60532-1646
630-769-0332

Name and Address of Member

St. Charles Park District
101 S. Second Street
Saint Charles, IL 60174
630-513-4310

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Automobile Liability * any auto	L010118	1/1/2018-12/31/2018	Bodily Injury and Property Damage combined	3
Workers' Compensation	WC010118	1/1/2018-12/31/2018		Statutory
Employer's Liability	WC010118	1/1/2018-12/31/2018		3

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

Sunset Cider Stroll 9/21/2018; Mount Saint Mary Park

Certificate Holder

St. Charles Park District

101 S. Second Street
Saint Charles, IL, 60174
630-513-4310



Authorized Representative

Date Issued: 4/4/2018

© 2015 PDRMA



Illinois Department of Revenue

Office of Local Government Services
Sales Tax Exemption Section, 3-520
101 W. Jefferson Street
Springfield, IL 62702
217 782-8881

January 2, 2015

ST CHARLES PARK DISTRICT
TREAS OF ST CHARLES PK DIST
101 S SECOND ST
ST CHARLES IL 60174

Effective January 1, 2015, we have renewed your governmental exemption from payment of the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Use Tax, as required by Illinois law.

We have issued the following new tax exemption identification number:

E9996-0427-07
to
ST CHARLES PARK DISTRICT
of
ST CHARLES, IL

The terms and conditions governing use of your exemption number remain unchanged.

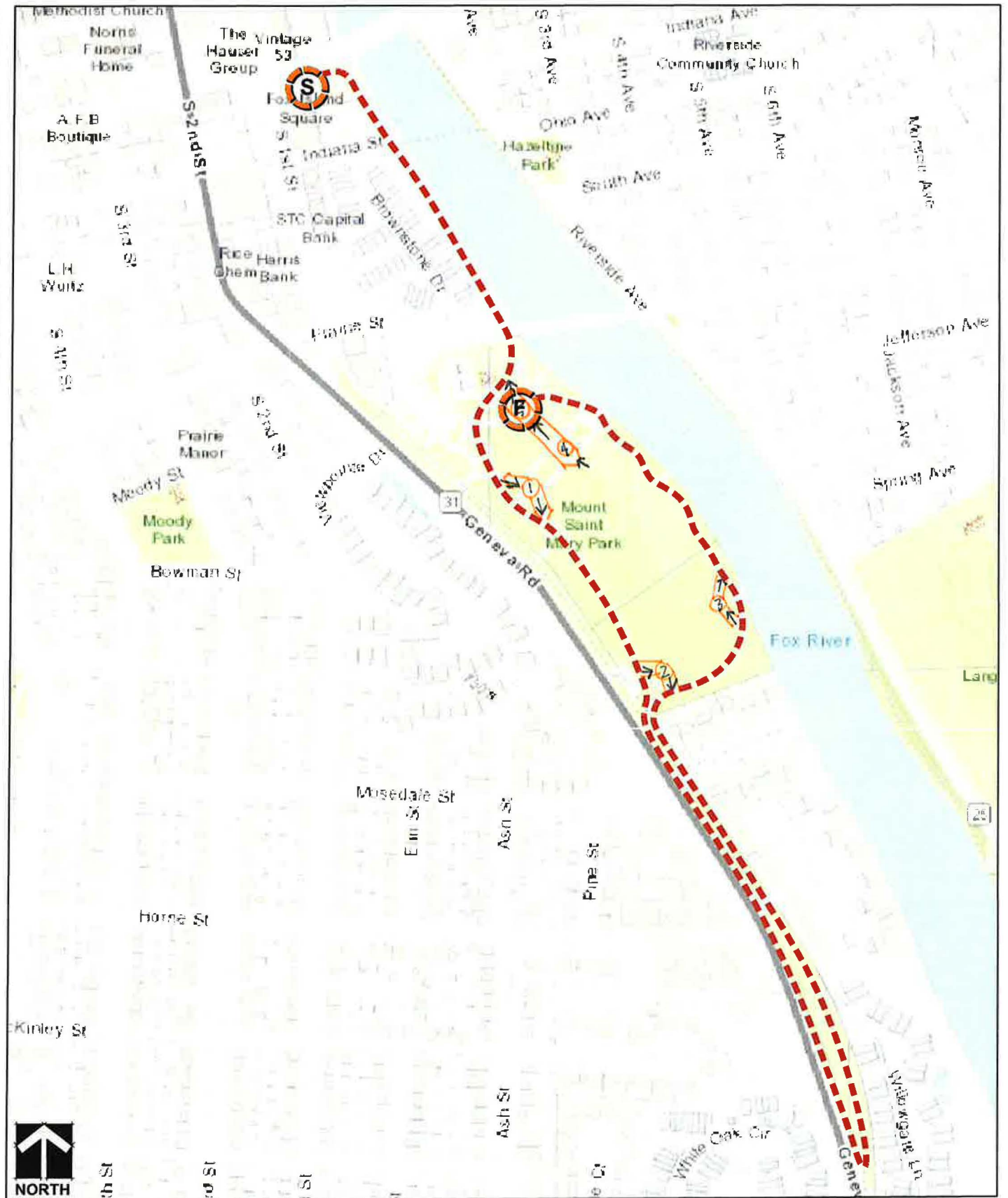
Office of Local Government Services
Illinois Department of Revenue



EVENT ROUTE

MT. ST. MARY PARK & SURROUNDING AREA

ST. CHARLES, ILLINOIS



Downtown St. Charles Event Review Proposal

Submitted by: Jennifer Bruggeman, Assistant Superintendent of Recreation, St. Charles Park District
jbruggeman@stcparks.org (630) 513-4337

1. Please describe the purpose of your event including the proposed date(s)/time(s).

Friday, September 21, 5-7pm

This adults only (ages 21+) event will encourage enjoyment of outdoor walking within downtown St. Charles while providing participants seasonal food and hard cider samples. Following the event, participants will be encouraged to dine downtown to continue the evening of fun.

2. Explain how your event will comply with the evaluation criteria, as described in the Downtown Events evaluation summary.

a. Benefit to Downtown Business

Promotional materials and participation will direct adults to downtown St. Charles for food and beverage consumption.

b. Ease and Ability of Production

Park District staff has many years of event planning experience combined with good working relationships with City, Police and local businesses.

c. Broad Popularity

The target market of adults, ages 21+ is broad and will draw athletes and non-athletes with the 2.25 mile, untimed stroll.

d. Coordination and Collaboration

Conversations and permit applications are already underway with the Park District, City of St. Charles and liquor commission. Collaboration with the downtown businesses has also begun. Finalization of partnerships will occur once the event has been approved by all necessary authorities.

e. Expansion and Diversity of the Downtown Event Calendar

This event provides the excitement and draw of a beer sampling 5k race without the need to compete 3+ miles in a timed race.

3. What distances will people travel to participate in the event? Please justify. (i.e. local participants who live within a 5-10 mile radius or regional event attracting people from 3-4 states with a 5-10 hour driving distance.)

This event will be marketed in the Park District activity guide, website and through social media. We anticipate local and semi-local (within 30 minute drive) attendees.

4. What is the estimated number of event a) Participants b) Attendees? Please justify.

We are hoping for 100 participants. There will be no "attendees" that are not participants or volunteers/staff.

- 5. Safety and the impact on downtown businesses, residents and the City are major priorities. Please describe what street closures, detours, and parking you would request and how you would address concerns from these stakeholders?**

No street closures are requested. Starting in the Fox Island Square parking lot allows participants pedestrian only access to Mount Saint Mary Park, following the path beneath Prairie Street. Employees or volunteers will be stationed near the neighborhood access points from Route 31 through the walking path.

The event ends in Mount Saint Mary Park and participants will be encouraged to exit the park and re-enter downtown St. Charles through the same walking path on which they entered.

- 6. Please describe what makes this event unique to Downtown St. Charles.**

This event is unique in location-walkways along the Fox River and through downtown St. Charles and Mount Saint Mary Park. It is also unique in that it promotes walking outdoors to people who may or may not be avid exercisers. Unlike a 5k events, participation pace will not be timed. The length of the route is mapped at 2.25 miles which we feel will seem achievable to most non-athletes.

- 7. How will you measure success?**

Should we reach a minimum participation level (60 participants), post-event surveys will be emailed to participants and partners/vendors. Staff will also discuss successes and challenges following the event. Mostly positive reports with minimal incidents or concerns will be deemed as success. Ending the event in a positive financial position will also be necessary to consider the event a success.

- 8. If success, as you have defined it, is reached, please describe future plans for this event.**

Park District staff will evaluate the financial position, participant and partner comments prior to determining if the event will be held again.

- 9. Attach the business and marketing plans with expected revenue, expenses and sponsors secured.**

Attached.

- 10. How will your organization secure funding necessary to pay for any requested or required City resources?**

The Park District will engage its special event budget and participation fees to cover expenses related to this event.

ILLINOIS LIQUOR CONTROL COMMISSION
100 W. Randolph Street, Suite 7-801 – Chicago, IL 60601
BEVERAGE ALCOHOL SELLERS AND SERVERS
EDUCATION AND TRAINING [BASSET] CARD

Trainer: 5A-0062851 4/28/2014 Date Issued: 5/13/2014

Card Holder: Piner, Lara

8 North Ave

St. Charles, IL 60174

This card is not transferrable

\$15 Replacement Fee if Lost

ILLINOIS LIQUOR CONTROL COMMISSION



This Certificate of Completion is to Certify that

Taylor Krawczyk

has met all training requirements and successfully completed the following course and/or exam.

Illinois BASSET Responsible Beverage Server Training

Date of Completion: June 16, 2017

Expiration Date: June 15, 2020

unless otherwise mandated by your local jurisdiction

State Student ID: 300288

Course/Exam Provider Number: 5A-0079696

BASSETpermit.com is approved by the Illinois Liquor Control Commission. Your training information has been submitted to the Illinois Liquor Control Commission. This is a temporary certificate and your official BASSET certification card will be mailed to you directly from them.

Authorized Signature

Diversys Learning, Inc.
1101 Arrow Point Drive, Suite 302
Cedar Park, TX 78613

11. Provide a list of downtown businesses you have identified as likely to be affected by your event/promotion and a brief summary of your communication with them to date.

The following downtown businesses have been approached through email and in-person to partner on this event. Opportunities are available to provide food or drink samples, inclusion in promotional materials and sales at the event. We are still waiting confirmations from these businesses:

- Blue Goose Market
- Arcedium
- The Wine Exchange
- Eden on the River
- Painted Vine Cellar
- Kimmers Ice Cream

Sunset Cider Stroll Budget

Revenue	
Participation Fee-Early	\$20 x 100 participants = \$2,000
Participation Fee-Late	\$25 x 20 participants = \$500
Sponsors	\$125 x 4 = \$500
Total Revenue	\$3,000
Expenses	
Special Event Application	
Outdoor Sales Permit	\$65
Class E-1 Liquor License	\$50
Marketing	\$100
Participant Take-Home Gift	\$7.50 x 140=\$1,050
SCPD Parks Staff	\$20/hr x 3 hrs x 4 staff = \$240
SCPD Recreation Staff	\$25/hr x 6 hrs x 8 staff = \$1,200
Supplies	\$200
Total Expenses	(\$2,905)
Net Profit	\$95

Marketing Plan

- Inclusion in St. Charles Park District fall Activity Guide
- Paid social media posts targeting:
 - Date night
 - Girls night
 - Seasonal stroll along the Fox River
- Posters in Park District, partners and other local businesses
- Mobile marketing message to Park District database in mid-August
- Inclusion in e-blasts to Norris Recreation Center and Park District pool season pass holders

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 4c

Title:

Recommendation to Approve an Ordinance Amending Title 5, Entitled “Business Licenses and Regulations” Chapter 5.08, “Alcoholic Beverages”, 5.08.090, “License - Classifications”, and Section 5.08.150, “License – Cessation of Business – Revocation of Licenses – Reduction in Licenses” of the St. Charles Municipal Code.

Presenter:

Jim Keegan, Police Chief

Meeting: Government Operations Committee

Date: May 21, 2018

Proposed Cost: \$

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** (if not budgeted please explain):

The attached liquor code modifications follow both conversation with a specific licensee (The Wine Exchange/5.08.090 – License Classifications/A-5) and the recent conversation and direction at Government Operations Committee concerning the 5.08.150 (Cessation of Business/Grandstander).

The Wine Exchange is requesting the option to serve craft beer and selected spirits on-site (for consumption on the premises) similar to how they offer these products from a retail perspective. Like their retail covenants, these on-site sales cannot account for more than 25% of their gross sales; thus ensuring their license remains largely wine only. Staff concurs with this request and recommends accordingly.

The Cessation of Business (5.08.150) provision was a largely debated issue that after research and consultation with counsel was silent in other liquor codes and viewed as unnecessary within our current code. From a staff perspective, our current language was confusing and is difficult to interpret. Significant provisions are already in place that ensures compliance with our liquor code in regards to the Change of Name (5.08.170) and License Classifications (5.08.090) that require both site drawings and business models at both application and renewal. It is staff’s recommendation to remove section 5.08.150 from our current liquor code.

Pursuant to this item being presented at the Government Operations Committee meeting on Monday, May 21, 2018 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled at 4:30 p.m., the same day, to process and move it forward to this Committee. This item will then continue on to the City Council meeting scheduled on June 4, 2018 for final approval.

Attachments (please list):

Proposed Ordinance Amendments

Recommendation/Suggested Action (briefly explain):

Recommendation to Approve an Ordinance Amending Title 5, Entitled “Business Licenses and Regulations” Chapter 5.08, “Alcoholic Beverages”, 5.08.090, “License - Classifications”, and Section 5.08.150, “License – Cessation of Business – Revocation of Licenses – Reduction in Licenses” of the St. Charles Municipal Code.

City of St. Charles
Ordinance No. 2018-M-_____

Ordinance Amending Title 5, Entitled “Business Licenses and Regulations” Chapter 5.08, “Alcoholic Beverages”, 5.08.090, “License - Classifications”, Section 5.08.150, “License – Cessation of Business – Revocation of Licenses – Reduction in Licenses” of the St. Charles Municipal Code

BE IT ORDAINED BY THE CITY COUNCIL OF THE CITY OF ST. CHARLES, KANE AND DUPAGE COUNTIES, ILLINOIS, AS FOLLOWS:

SECTION ONE: That Title 5 “Business Licenses and Regulations” Chapter 5.08, “Alcoholic Beverages”, 5.08.090, “License – Classifications” be amended by adding the following:

A-5. Class A-5 licenses shall authorize the retail sale of domestic and imported wines, champagne, imported alcoholic liquor and gourmet craft beer in original packages only and not for consumption on the premises. The retail sale of alcoholic liquor and beer shall be incidental to wine ~~non-alcoholic liquor~~ ~~retail~~ sales and shall not exceed twenty-five percent (25%) of the annual gross sales of said licensee. Class A-5 licenses shall also authorize the retail sale of wine, gourmet/craft beer and alcoholic liquor by the glass only, for consumption on the premises.

SECTION TWO: That Title 5 “Business Licenses and Regulations” Chapter 5.08, “Alcoholic Beverages”, Section 5.08.150, “License – Cessation of Business – Revocation of Licenses – Reduction in Licenses” of the St. Charles Municipal Code be amended by Removing in its entirety:

~~In the event the licensee ceases to do business at the licensed premises, whether voluntarily or involuntarily (including revocation of licensee’s local liquor license), other than temporarily for a period of not to exceed thirty (30) successive days, for purposes of remodeling, or for purposes other than remodeling but with the prior written approval of the Local Liquor Control Commissioner, the local liquor license of such licensee shall be deemed forfeited and the number of authorized local liquor licenses in the particular class shall automatically be reduced by one as of the date the licensee ceases to do business. If any licensee desires to close the business or place of business for more than thirty (30) successive days, said licensee shall so notify the Local Liquor Control Commissioner in writing, including the reasons therefore and requesting an extension, and the Local Liquor Control Commissioner may grant such an extension on a showing of good cause. The Local Liquor Control Commissioner shall notify in writing the City Clerk and City Council of any cessation of business by a licensee, in excess of thirty (30) days. (OURS)~~

SECTION THREE: That after the adoption and approval hereof, this Ordinance shall (i) be printed or published in book or pamphlet form pursuant to the authority of the City Council, or (ii) within thirty (30) days after the adoption and approval hereof, be published in a newspaper published in and with a general circulation within the City of St. Charles.

SECTION FOUR: This Ordinance shall be in full force and effect ten (10) days from and after its passage by a vote of the majority of the corporate authorities now holding office, approval and publication in the manner provided by law.

PRESENTED to the City Council of the City of St. Charles, Illinois, this ____ day of _____, 2018.

PASSED by the City Council of the City of St. Charles, Illinois this ____ day of _____, 2018.

APPROVED by the Mayor of the City of St. Charles, Illinois, this ____ day of _____, 2018.

Raymond P. Rogina, Mayor

ATTEST:

City Clerk

COUNCIL VOTE:

Ayes : _____


Nays : _____

Absent : _____

APPROVED AS TO FORM:

City Attorney

DATE: _____

	AGENDA ITEM EXECUTIVE SUMMARY		Agenda Item number: 4d
	Title:	Recommendation to approve a Proposal for a New Class E-8 Liquor License for the St. Charles History Museum, located at 215 E Main Street, St. Charles.	
	Presenter:	Jim Keegan, Police Chief	
Meeting: Government Operations Committee		Date: May 21, 2018	
Proposed Cost: \$		Budgeted Amount: \$	Not Budgeted: <input type="checkbox"/>
<p>Executive Summary <i>(if not budgeted please explain):</i></p> <p>The St. Charles History Museum is seeking approval of the newly created E-8 Liquor License (outlined below) which was approved by City Council earlier this year.</p> <p>A background investigation, site visit, an attached floor plan and the associated documents pertaining to the aforementioned license are in order to include Dram Shop Insurance (the City listed as the Certificate Holder) and Basset training.</p> <p>This license authorizes up to 12-events per calendar year to include special events (Foodie Fest).</p> <p>Staff recommends approval.</p> <p>E-8. Class E-8 licenses shall authorize the sale or delivery of alcoholic liquor, for consumption on the premises only and incident to food service at a special event sponsored by, or conducted at the St. Charles History Museum located at 215 E. Main Street, St. Charles, Illinois. The Class E-8 license shall be issued solely for the conduct of not more than twelve (12) events that the Local Liquor Control Commissioner and Chief of Police deem licensable per calendar year at the specific premises. Each of the events may not be more than one day in duration. The schedule of such events shall be subject to approval by the Chief of Police so as to avoid conflicts between said events and major festivals or events occurring in the City, including, but not limited to Scarecrow Festival, the St. Patrick's Day Parade, and the Holiday Homecoming Electric Lights Parade. Any such event at the premises which is in whole or partly held outdoors or on the City sidewalk, street or parking facility must otherwise be in accordance with any and all applicable provisions of the City's Code, including obtaining a special event permit from the City.</p> <p><i>Pursuant to this item being presented at the Government Operations Committee meeting on Monday, May 21, 2018 to seek approval; it will be brought before the Liquor Control Commission at a meeting scheduled at 4:30 p.m., the same day, to process and move it forward to this Committee. This item will then continue on to the City Council meeting scheduled on June 4, 2018 for final approval.</i></p>			
<p>Attachments <i>(please list):</i></p> <p>Memo, Application, BASSET, Site Plan, COI</p>			
<p>Recommendation/Suggested Action <i>(briefly explain):</i></p> <p>Recommendation to approve a Proposal for a New Class E-8 Liquor License for the St. Charles History Museum, located at 215 E Main Street, St. Charles.</p>			



Memo

Date: 05/14/18
To: Chief Keegan
From: Commander Pierce *CP*
Re: Liquor License Background, St. Charles History Museum 215 E. Main St.

The purpose of this memo is to outline steps taken during the background investigation for a liquor license application. This investigation was done based on the application submitted for a Class E-8 license for the St. Charles History Museum, 215 E. Main St..

Applicants:

Costanzo, Alison T. Wolf, Amanda M.

[REDACTED]

[REDACTED]

Application:

The application was received on 04/10/18. The application lists two managers, Alison Costanzo and Amanda Wolf. At the time of the application Costanzo's BASSET certification had expired. Costanzo has since completed the certificate course and will send me the certificate when it arrives. Wolf currently holds a valid BASSET certification which expires on 04/25/19. There is no lease attached. Costanzo said they lease the building from the City which is a 99 year lease. An insurance quote from Geiken Insurance agency is attached to the application. A floor plan was submitted.

Records Checks:

Both Costanzo and Wolf were fingerprinted. The response from the FBI and Illinois Bureau of Identification shows nothing that would interfere with this process.

A check of St. Charles and Kane County records showed one police contact for each. Costanzo called in a suspicious person to SCPD and Wolf called in a found item to SCPD.



A check of Costanzo's name with Riverside, Illinois police revealed no contacts that would impact this background. A check of Wolf's name with Hoffman Estates, Illinois police revealed no contacts that would impact this background.

A check of the Illinois Liquor Control Commission showed no current license and no record of license revocation for the museum or Costanzo and Wolf.

A check of TLO and I-Clear (law enforcement databases) showed the information concerning Costanzo or Wolf's identity to be accurate and no areas of concern were noted.

Both are U.S. citizens.

SITE VISIT:

On 04/11/18, I visited the location. The building has three areas that the public has access to. The first area is immediately when you walk in the front door. This is the gift shop area. To the rear and right in the gift shop is an opening to a small standing area that divides the gift shop from the main museum/display area located to the rear of the building. This small standing area is where the office's and meeting room access doors are located. Once past the standing area the building opens to a large display area which takes up most of the square footage of the public area. There is a double door located on the west wall of the main area. This double door leads to the brick patio on the south west corner of the building. The museum would like to incorporate the patio into their event space. The bathroom for the museum is also located on the south side of this main area. After the site visit I met with Wolf and informed her of the signage the museum will need to hang near where the alcohol will be served. Copies of the signs were given to her and she was instructed on how she could print more.

INTERVIEW WITH APPLICANT:

During the site visit, I met with Alison Costanzo at the museum. Costanzo indicated the museum has no liquor inventory at this time and they are not planning on keeping alcohol on site. Costanzo advised the main reason for the liquor license is so the museum can serve alcohol when they rent the space for gatherings such as bridal showers and class reunions. Costanzo said she plans on coordinating alcoholic beverage sales through local business. The local business would cater the event and be the ones supplying and serving the alcohol. She has been in communication with "The Office" which is next door to the museum and Global Brew on the west side of town. Costanzo said she is thinking of speaking with other business in town too. Costanzo said the museum would like to use the outdoor patio area during their events. Costanzo was aware the museum would have to block off any access from the outside to the patio during the events.

This concludes this background investigation. Recommend approval.

City of St. Charles, Illinois Liquor Control Commissioner
CITY RETAIL LIQUOR DEALER LICENSE APPLICATION
APPLICATION FEE IS NON-REFUNDABLE



Incomplete applications will not be accepted.

Completed applications may be submitted to:

Two East Main Street, St. Charles, IL 60174-1984

Date Application Received: 4/10/2018 ☒ New Application ☐ Renewal Application

APPLICATION CHECKLIST

Check items to confirm all are attached to this application	Applicant	Office Use Only
Application Fee	<input type="checkbox"/>	<input type="checkbox"/>
Completed Application for all questions applicable to your business.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Lease/Proof of Ownership	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Dram Shop Insurance or a letter from insurance agent with a proposed quote.	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Articles of Corporation, if applicable.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Completed B.A.S.S.E.T. (Beverage Alcohol Sellers & Servers Training) form – filled out for all employees. A copy of the B.A.S.S.E.T. certificate is only needed for each manager . It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for all of their employees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Site Plan for Establishment (Drawn to scale including the parking lot, patio and/or deck, outdoor seating).	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Copy of Floor Plan for Establishment (Drawn to scale and must include the layout of the establishment with tables, chairs, aisles, displays, cash register, bar, and lounge area with dimensions, percentage, and square footage noted for each space). Be sure to also include all fixed objects , such as pool tables, bar stools, vending/amusement machines; as well as all exits .	<input type="checkbox"/>	<input type="checkbox"/>
Copy of Business Plan, to include: <input checked="" type="checkbox"/> Hours of Operation <input type="checkbox"/> Copy of Menu Whether or not live music will be played at this establishment Will there be outdoor seating and/or outdoor designated smoking area Do not include a marketing or financial plan with this business plan	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Are any building alterations planned for this site? If not sure, please contact Building & Code Enforcement at 630.377.4406 and/or Fire Prevention Bureau at 630.377.4458 to discuss whether or not a walk-thru and/or permit are necessary for this business.	<input type="checkbox"/>	<input type="checkbox"/>
All managers have been fingerprinted who are employed by your establishment. When new management is hired, it is imperative you contact the Mayor's office to be fingerprinted so the City's business files are appropriately updated.	<input type="checkbox"/>	<input type="checkbox"/>

OFFICIAL USE ONLY

☐ Approved* ☐ Denied Date Approved/Denied: _____ Customer Number: _____

Signature of Mayor, Liquor Control Commissioner

Date Issued

***ISSUANCE OF THIS LICENSE IS CONTINGENT ON MEETING ALL REQUIRED BUILDING AND FIRE DEPARTMENT REQUIREMENTS.**

07.05.2016

APPLICANT INFORMATIONA. Type of Business: ☐ Individual ☐ Partnership ☐ Corporation ☒ Other (explain): *Museum Non Profit*B. Business Name: *St. Charles History Museum*C. Business Address: *215 E main Street, St Charles*

D. IL Tax ID Number:

51-0168405

E. Business Phone:

6305846967

F. Business E-mail:

info@stkmuseum.org

G. Business Website:

stkmuseum.org

H. Contact Person:

Alison Costanzo

I. Title:

Ex Director

J. Phone No.:

K. If Corporation, Corporation Name:

L. Corporation Address (city, state, zip code):

BUSINESS ESTABLISHMENT LOCATION INFORMATIONA. Type of Establishment: ☐ Package ☐ Restaurant ☐ Tavern ☐ Hotel/Banquet/Arcade/Q-Center ☒ OtherB. Address applying for liquor license (exact street address): *215 E. Main Street*

C. Number of Parking Spaces:

D. Outside Dining s.f. [17.20.020-R]:

E. Holding Bar s.f. [5.08.010-F]:

F. Total Building s.f.:

G. Total Number of Seats:

H. Number of Bar Seats:

I. Sale Counter s.f.:

J. Live Entertainment Area s.f. [5.08.010-H]:

K. Kitchen s.f.:

L. Cooler s.f.:

M. Dry Storage s.f.:

N. Seating Area s.f.:

O. Retail/public Area s.f.:

P. Service Bar s.f. [5.08.010-O]:

Q. Brief Business Plan description based on type of establishment listed above: *The St Charles History Museum is a 501(c)(3), and as part of our initiative to increase awareness of the Museum and increase revenue streams we plan on hosting (12) events throughout the year (graduation parties, reunions, and meetings).***MANAGER INFORMATION**Full Name, include middle initial: *Alison T. Costanzo*Title: *Ex. Director*

Birthdate: [REDACTED]

Birthplace: [REDACTED]

Driver's License#: [REDACTED]

Home Phone: [REDACTED]

Home Address: [REDACTED]

Full Name, include middle initial: *Amenda Wolf*Title: *Curator & Marketing Coordinator*

Birthdate: [REDACTED]

Birthplace: [REDACTED]

Driver's License#: [REDACTED]

Home Phone: [REDACTED]

Home Address: [REDACTED]

Full Name, include middle initial:

Title:

Birthdate:

Birthplace:

Driver's License#:

Home Phone:

Home Address:

PROPOSED FLOOR PLAN/LAYOUT OF PROPERTY**Mandatory: attach to this application a floorplan or layout of the proposed facility to include the following:****CLASS B LICENSES**

1. Every application for a Class B license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale showing the following (**check off once complete**):
 - a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;
 - b. The designated use of each room or segregated area (i.e. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);
 - c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided. **
2. The site drawing is subject to the approval of the Local Liquor Control Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any license by noting the same on the approved site drawing or as provided on the face of the license.
3. A copy of the approved site drawing shall be attached to the approved license and is made a part of said license.
4. It shall be unlawful for any Class B licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing.

CLASS C LICENSES

1. Every application for a Class C license, whether an initial application or a renewal application, shall have attached thereto a site drawing of the proposed licensed premises, drawn to scale, showing the following (**check off once complete**):
 - a. The location of all rooms, segregated areas, including outdoor seating areas and the square footage thereof;
 - b. The designated use of each room or segregated area (e.g. dining room, holding bar, service bar, kitchen, restrooms, outdoor seating areas, all rooms and segregated areas, including outdoor areas, where alcoholic liquor may be served or consumed and all locations where live entertainment may be provided);
 - c. The proposed seating capacity of rooms or segregated areas where the public is permitted to consume food and/or alcoholic beverages and/or live entertainment may be provided. **
2. The site drawing is subject to the approval of the Local Liquor Commissioner. The Local Liquor Commissioner may impose such restrictions as he deems appropriate on any licensee by noting the same on the approved site drawing or as provided on the face of the license.
3. A copy of the approved site drawing shall be attached to the approved license and is made a part of said license.
4. It shall be unlawful for any Class C licensee to operate and/or maintain the licensed premises in any manner inconsistent with the approved site drawing.

****THE FIRE PREVENTION BUREAU WILL FURNISH ALL FINAL, PERMITTED OCCUPANCY NUMBERS FOR THIS LICENSE.**

CORPORATION / PREMISES QUESTIONS

1.	<p>If applicant is an individual or partnership, is each and every person a United States citizen (5.08.070-2)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Is any individual a naturalized citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, print name(s), date(s), and place(s) of naturalization:</p>
2.	<p>List the type of business of the applicant (5.08.070-3): <i>Non Profit</i></p>
3.	<p>Number of years of experience for the above listed type of business (5.08.070-4): <i>85 years</i></p>
4.	<p>Amount of merchandise that normally will be in inventory when in operation (5.08.070-5): \$</p>
5.	<p>Location/address and description of business to be operated under this applied for license (5.08.070-6):</p> <p><i>215 E. main Street, St Charles, IL 60174</i></p> <p><i>Non Profit History Museum</i></p>
6.	<p>Is the premises owned or leased (5.08.070-6A)? <input type="checkbox"/> Owned <input checked="" type="checkbox"/> Leased</p>
7.	<p>If the premises are leased, list the names and addresses of all direct owners or owners of beneficial interests in any trusts, if premises are held in trust (5.08.070-6B):</p> <p>Name of Building Owner: <i>City of St. Charles</i></p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p> <p>Name of Building Owner:</p> <p>Address of Building Owner:</p> <p>Mailing Address of Building Owner (if different):</p> <p>Phone Number: E-mail Address:</p>
8.	<p>Does the applicant currently operate, or operated in the past, any other establishment within the City of St. Charles that requires a liquor license? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please list the business name(s) and address(es):</p>

9.	<p>Does applicant have any outstanding debt with the City of St. Charles, including, but not limited to, utility bills, alcohol tax, and permit fees, for any current or previous establishment owned, operated or managed by the applicant? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, please note the City of St. Charles requires all debt to be paid in full before consideration of a new or renewed liquor license is issued.</p>
10.	<p>Are any improvements planned for the building and/or site that will require a building permit? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, has a building permit been applied for? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, date building permit was applied for with Building & Code Enforcement:</p>
11.	<p>Has applicant applied for a similar or other license on the premises other than the one for which this license is sought (5.08.070-7)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, what was the disposition of the application? Explain as necessary: <i>yearly (1) day license for annual fundraiser held on site.</i></p>
12.	<p>Has applicant (and all persons listed on page 1 of this application) ever been convicted of a felony under any Federal or State law, or convicted of a misdemeanor opposed to decency or morality (5.08.070-8)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Is applicant (and all persons listed on page 1 of this application) disqualified from receiving a liquor license by reason of any matter contained in Illinois State law and/or City of St. Charles Municipal Ordinances? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>
13.	<p>List previous liquor licenses issued by any State Government or any subdivision thereof (5.08.070-9). Use additional paper if necessary.</p> <p>Government Unit:</p> <p>Date: _____ Location, City/State: _____</p> <p>Special Explanations:</p> <p>Government Unit:</p> <p>Date: _____ Location, City/State: _____</p> <p>Special Explanations:</p>
14.	<p>Have any liquor licenses possessed ever been revoked (5.08.070-9)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, list all reasons on a separate, signed letter accompanying this application.</p> <p>Has any director, officer, shareholder, or any of your managers, ever been denied liquor license from any jurisdiction? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, proceed to Question 15. If more space is needed, please attach a separate sheet of paper with the information.</p>

15.	<p>Complete ONLY if yes was answered to the questions above (14):</p> <p>Name: _____ Name of Business: _____</p> <p>Position with the Business: _____</p> <p>Date(s) of Denial: _____</p> <p>Reason(s) for Denial of License: _____</p>
16.	<p>Date of Incorporation (Illinois Corporations) (5.08.070-10): 1933</p> <p>Date qualified under Illinois Business Corporation Act to transact business in Illinois (Foreign Corporation):</p>
17.	<p>Has the applicant and all designated managers read and do they all understand and agree not to violate any liquor laws of the United States, the State of Illinois, and any of the ordinances of the City of St. Charles in conducting business(5.08.070-11)?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Have you, or in the case of a corporation, the local manager, or in the case of a partnership any of the partners, ever been convicted of any violation of any law pertaining to alcoholic liquor? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you, or in the case of a corporation the local manager, or in the case of a partnership any of the partners, ever been convicted of a felony? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Have you ever been convicted of a gambling offense? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No (If a partnership or corporation, include all partners and the local manager(s).)</p> <p>Will you and all your employees refuse to serve or sell alcoholic liquor to an intoxicated person or to a minor?</p> <p><input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>
18.	<p>Mandatory: All individual owners, partners, officers, directors, and/or persons holding directly or beneficially more than five (5) percent in interest of the stock of owners by interest listed on page 1 of this application must be fingerprinted by the City of St. Charles Police Department (5.08.070-A12).</p> <p>Has this been done? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, date(s): _____</p>
19.	<p>Mandatory: Has the applicant attached proof of Dram Shop Insurance to this application or already furnished it to the City of St. Charles (5.08.060)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If already furnished, date of delivery: _____</p> <p>NOTE: Insurance must be issued from May 1, 20XX – April 30, 20XX in accordance with City code 5.08.060. Request a prorated rate from your insurance company if you are applying for a new license during this timeframe.</p>

20. **Mandatory:** Is the premises within 100 feet of any real property of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands, or children; and/or any military or naval station **(5.08.230)**?

☒ Yes ☐ No

COMMENTS/ADDITIONAL INFORMATION

B.A.S.S.E.T. TRAINING

Please list employees required to have B.A.S.S.E.T training on this page – include all managers, assistant managers, bartenders, and clerks who are permitted to make alcoholic liquor sales. **Include copies of certificates for managers only and mark Manager if applicable. Add another page, if needed.**

Name:(First) *Alison*(Last) *Costanzo*

(Middle) [REDACTED]

Manager

Home Street Address: [REDACTED]

City, State, Zip:

Date of Course: *Renewing*Place Course was Taken: *Online National Hospitality Training*

Birthdate: [REDACTED]

Certificate Granted:

Expiration:

Name:(First) *Amanda* (Last) *Wolf*

(Middle)

Manager

Home Street Address: [REDACTED]

City, State, Zip:

Date of Course: *4/29/16*Place Course was Taken: *online*

Birthdate: [REDACTED]

Certificate Granted: *yes*Expiration: *4/21/19***Name:**

(First)

(Last)

(Middle)

Manager

Home Street Address:

City, State, Zip:

Date of Course:

Place Course was Taken:

Birthdate:

Certificate Granted:

Expiration:

Name:

(First)

(Last)

(Middle)

Manager

Home Street Address:

City, State, Zip:

Date of Course:

Place Course was Taken:

Birthdate:

Certificate Granted:

Expiration:

NEW MANAGEMENT REQUIREMENTS

Whenever a new manager comes on board, the City must be notified and that person must be fingerprinted.

It is the business establishment's responsibility to keep copies of all B.A.S.S.E.T. certificates on file for their employees.

APPLICATION FOR LATE NIGHT PERMIT**SUPPLEMENTAL TO LIQUOR LICENSE FOR CLASS B/C****To: St. Charles Liquor Control Commission****Date:**

I now possess or have applied for a liquor license Class

Applicant's Name:

Name of Business:

Business Address:

Business Phone:

SUPPLEMENTAL PERMIT APPLIED FOR**Payment of Late Night Permit fee is required at the time the permit is issued.**☐ 1:00 a.m. Late Night Permit – fee of \$800.00☐ 2:00 a.m. Late Night Permit – fee of \$2,300.00**NOTE:** Other permits that may be available upon request include:

- Class E – Special Event License (1 to 3-day event @ \$100.00 per day)
- Outdoor Dining Permit (Contact Community & Economic Development @ 630.377.4443)

SIGNATURES

Applicant's Signature

☐ Liquor Commissioner hereby directs City Clerk to issue permit indicated above._____
Liquor Commissioner's Signature_____
Date

ADDENDUM TO RETAIL LIQUOR LICENSE APPLICATION

To be completed by the City of St. Charles Police Department

Date:

05/14/18

Name of Applicant:

ST CHARLES HISTORY MUSEUM

Name of Business:

ST CHARLES HISTORY MUSEUM

Address of Business:

215 E. MAIN ST. ST CHARLES IL

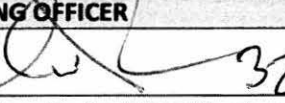
Ward Number:

4

To Liquor Control Commissioner, City of St. Charles, Illinois

Pursuant to the provision of the City of St. Charles Municipal Code, Chapter 5.08, Alcoholic Beverages, the following guide shall be in effect for the investigation of an applicant for a Retail Dealer's Liquor License:

1.	Date on which applicant will begin selling retail alcoholic liquors at this location: 06/23/18 - Foodie Fest
2.	Is the location within 100 feet of any church; school; hospital; home for the aged or indigent persons; home for veterans, their wives/husbands or children; or any military or naval station? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
3.	<p>If the answer to question 2 is yes, answer the following: Is applicant's place of business a hotel offering restaurant service, a regularly organized club, a restaurant, a food shop, or other place where the sale of alcoholic liquors is not the principal business? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, answer a, b and c:</p> <p>a. State the kind of such business:</p> <p>b. Give date on which applicant began the kind of business named at this location:</p> <p>c. Has the kind of business designated been established at this location for such purpose prior to February 1, 1934, and carried on continuously since such time by either the applicant or any other person?</p> <p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
4.	<p>If premises for which an alcoholic liquor license is herein applied for are within 100 feet of a church, have such premises been licensed for the sale of alcoholic liquor at retail prior to the establishment of such church? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, have the premises been continuously operated and licensed for the sale of alcoholic liquor at retail since the original alcoholic liquor license was issued therefore? <input type="checkbox"/> Yes <input type="checkbox"/> No</p>
5.	Is the place for which the alcoholic liquor license is sought a dwelling house, flat, or apartment used for residential purposes? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
6.	Is there any access leading from premises to any other portion of the same building or structure used for dwelling or lodging purposes and which is permitted to be used or kept accessible for use by the public? (Connection between premises and such other portion of building or structure as is used only by the applicant, his/her family and personal guests not prohibited.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
7.	<p>If applicant conducts or will conduct in the same place any other class of business in addition to that of City Retailer of Alcoholic Liquor, state the kind and nature of such business: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>HISTORIC MUSEUM</p>

8.	Are all rooms where liquor will be sold for consumption on the premises continuously lighted during business hours by natural light or artificial white light so that all parts of the interior shall be clearly visible? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
9.	Are premises located in any building belonging to or under the control of the State of Illinois or any other political subdivision thereof, such as county, city, etc.? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
10.	Are the premises for which license is herein applied for a store or place of business where the majority of customers are minors of school age or where the principal business transacted consists of school books, school supplies, food or drinks for such minors? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
11.	It is required by the City of St. Charles that all employees undergo BASSET training. Provide a copy of the certificate of training completion for each manager. All certificates for managers have been submitted: <input type="checkbox"/> Yes <input type="checkbox"/> No
12.	From your observation and investigation, has applicant—to the best of your knowledge—truthfully answered all questions? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No If no, state exceptions:
13.	Have all persons named in this application been fingerprinted? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Fingerprinted by: <u>IEP SULLINA J</u> Date: <u>041118</u>
14.	Other necessary data:
SIGNATURES	
ENDORSEMENTS AND APPROVALS	
INVESTIGATING OFFICER	
 Investigating Officer Signature	<u>323 Commander</u> Badge Number & Rank
ENDORSEMENT OF THE CHIEF OF POLICE	
Recommend Issuing Liquor License: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signature Of Chief of Police	Date

ENDORSEMENT OF THE LIQUOR CONTROL COMMISSIONERRecommend Issuing: ☐ Yes ☐ No Date: _____

Comments

Liquor Commissioner**ENDORSEMENT OF THE FIRE CHIEF**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Fire Chief**ENDORSEMENT OF THE BUILDING COMMISSIONER**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Zoning Classification: _____
Building Commissioner**ENDORSEMENT OF THE FINANCE DIRECTOR**Recommend Issuing: ☐ Yes ☐ No Date: _____

Comments:

Finance Director**APPROVAL OF THE CITY COUNCIL**Approved for Issuing: ☐ Yes ☐ No Vote: Ayes _____ Nays __________
Attested to by City Clerk Date: _____

BASSET Card



April 29, 2016



Letter ID: L0903302928

AMANDA WOLF
215 E. MAIN ST.
ST. CHARLES IL 60174

License No.: 5A-0105312
Expiration Date: 4/25/2019
License Type: Basset Card

Your "Student ID number" is: 2343403

Your "Trainer's ID number" is: 5A-0105312

Your BASSET Card is located BELOW

**DO NOT throw away this letter as you will need your
"Student ID number" directly above to re-print your card.**

IMPORTANT:

To re-print your card, visit the Illinois Liquor Control Commission website at ILCC.illinois.gov
(click on the RESOURCES tab to access the "BASSET Card Lookup" page).

<p>ILLINOIS LIQUOR CONTROL COMMISSION 100 W. Randolph Street, Suite 7-801 - Chicago, IL 60601 BEVERAGE ALCOHOL SELLERS AND SERVERS EDUCATION AND TRAINING [BASSET] CARD Date of Certification: 4/25/2016 Expires: 4/25/2019 Trainer's IL Liquor License Number: 5A-0105312 AMANDA WOLF 215 E. MAIN ST. ST. CHARLES IL 60174 **Card is not transferrable - OFF-PREMISE ONLY**</p>
--

INTERNAL REVENUE SERVICE
P. O. BOX 2508
CINCINNATI, OH 45201

DEPARTMENT OF THE TREASURY

Date: MAY 30 2014

ST CHARLES HERITAGE CENTER
215 MAIN ST
ST CHARLES, IL 60174

Employer Identification Number:
51-0168405
DLN:
17053295381023
Contact Person:
CUSTOMER SERVICE ID# 31954
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
December 31
Public Charity Status:
509(a)(2)
Form 990 Required:
Yes
Effective Date of Exemption:
May 15, 2013
Contribution Deductibility:
Yes
Addendum Applies:
Yes

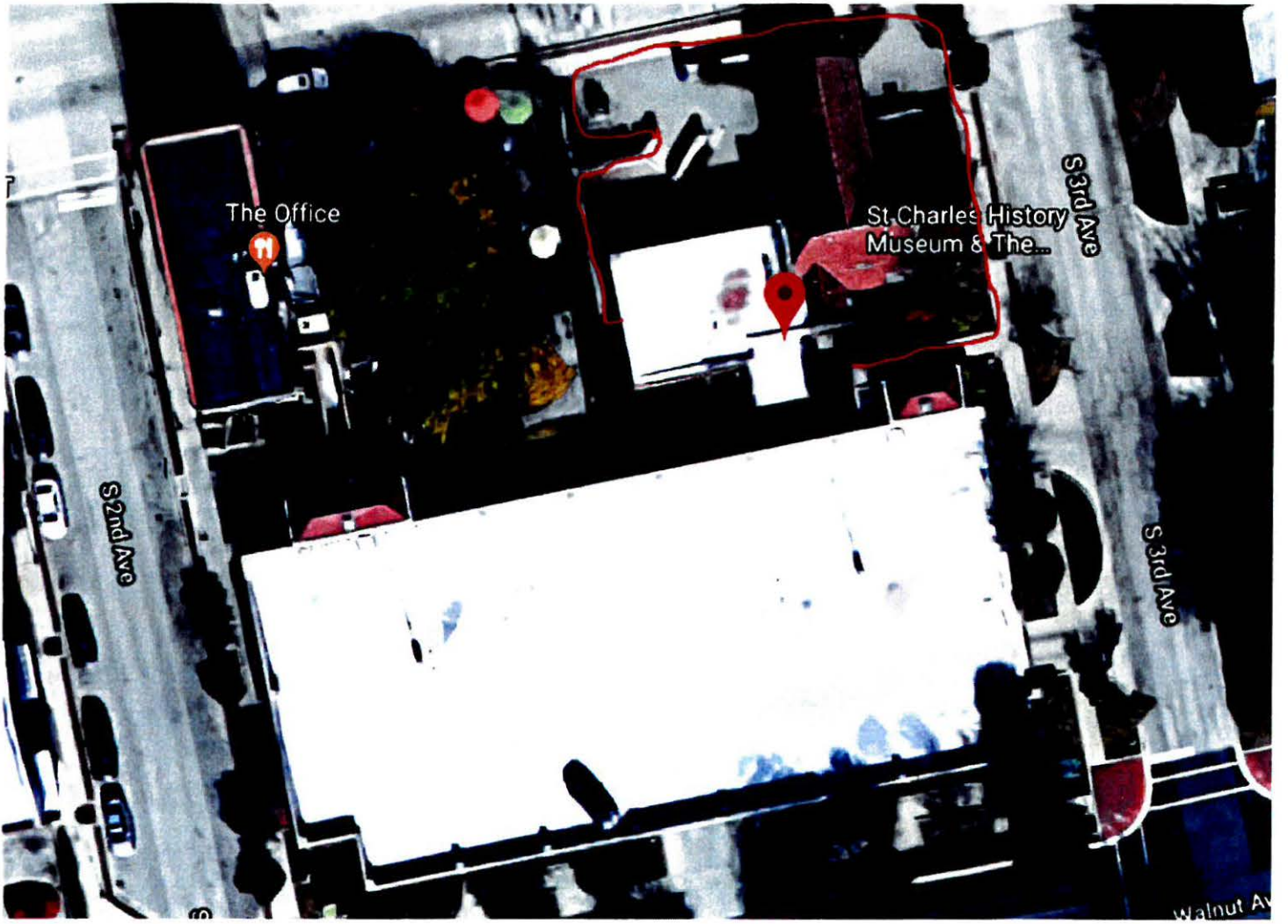
Dear Applicant:

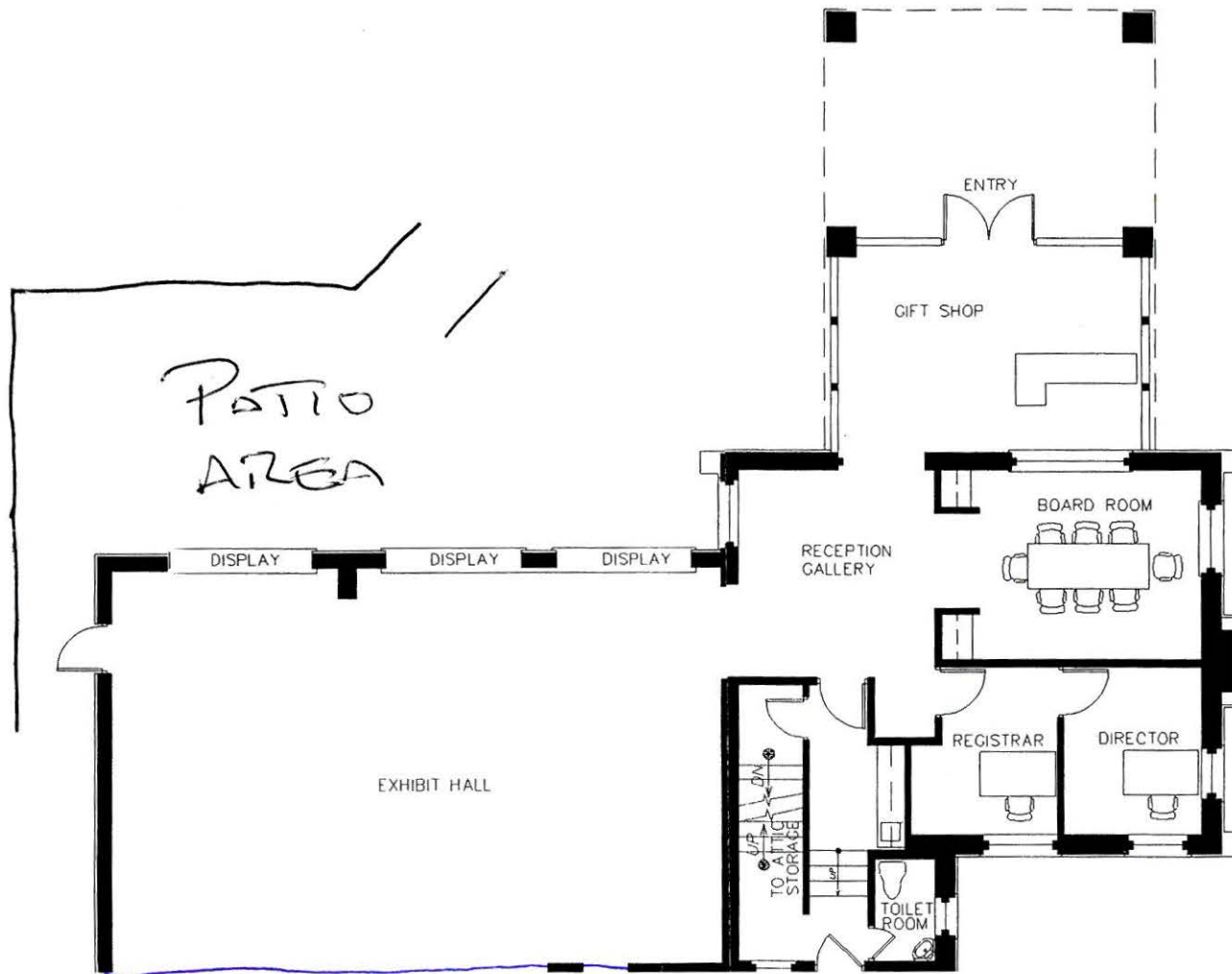
We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

Letter 947





**ST. CHARLES
HERITAGE CENTER**
at the historic McCormick Oil Co. building
215 E. Main St. / St. Charles, Illinois



214 West River Drive
St. Charles, IL
60174
630-377-9399

THIS DOCUMENT, THE DESIGN AND DRAWINGS, AND SPECIFICATIONS HEREIN, IS THE PROPERTY OF MR. DURRANT. IT IS TO BE USED ONLY FOR THE PROJECT AND SITE SPECIFICALLY IDENTIFIED HEREIN. NO PART OF THIS DOCUMENT IS TO BE REPRODUCED OR TRANSMITTED IN ANY FORM OR BY ANY MEANS, ELECTRONIC OR MECHANICAL, WITHOUT THE WRITTEN PERMISSION OF MR. DURRANT.

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Architect:
Durrant Architects

Revisions

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
05/01/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER The Geiken Insurance Agencies, Inc. 28 N Bennett St. P.O. Box 151 Geneva IL 60134	CONTACT NAME: Nick Geiken PHONE (A/C, No., Ext): (630) 232-4188 FAX (A/C, No.): (630) 232-4187 E-MAIL ADDRESS: nick@geiken-insurance.com														
INSURED St. Charles History Museum 215 East Main Street St. Charles IL 60174	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="text-align: left;">INSURER(S) AFFORDING COVERAGE</th> <th style="text-align: left;">NAIC #</th> </tr> <tr> <td>INSURER A : Scottsdale Insurance Company</td> <td></td> </tr> <tr> <td>INSURER B : Westchester</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A : Scottsdale Insurance Company		INSURER B : Westchester		INSURER C :		INSURER D :		INSURER E :		INSURER F :	
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COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS				
A	GENERAL LIABILITY			CPS2712334	06/22/2018	06/24/2018	EACH OCCURRENCE	\$ 1,000,000			
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY		DAMAGE TO RENTED PREMISES (Ea occurrence)				\$ 100,000				
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>	MED EXP (Any one person)				\$ 5,000				
			PERSONAL & ADV INJURY				\$ 1,000,000				
			GENERAL AGGREGATE				\$ 2,000,000				
			PRODUCTS - COMP/OP AGG				\$ 2,000,000				
	GEN'L AGGREGATE LIMIT APPLIES PER:										
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC										
	AUTOMOBILE LIABILITY									COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO	<input type="checkbox"/> SCHEDULED AUTOS								BODILY INJURY (Per person)	\$
<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					BODILY INJURY (Per accident)	\$				
<input type="checkbox"/> HIRED AUTOS						PROPERTY DAMAGE (Per accident)	\$				
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR					EACH OCCURRENCE	\$			
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE					AGGREGATE	\$			
	DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>							\$			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATUTORY LIMITS	OTH-ER			
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N	N/A				E.L. EACH ACCIDENT	\$			
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE	\$			
							E.L. DISEASE - POLICY LIMIT	\$			
B	Liquor Liability *	<input checked="" type="checkbox"/>		CPS2712334	06/01/2018	06/01/2019	Each Common Cause Aggregate	\$1,000,000 \$2,000,000			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

St Charles History Museum Foodie Fest - June 23rd 2018 *

CERTIFICATE HOLDER

* City of St Charles 2 East Main St St Charles,, IL 60174	*
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CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.	
AUTHORIZED REPRESENTATIVE	 <NRG>

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5a

Title:

Recommendation to approve an Ordinance Ascertaining Prevailing Wages in the City of St. Charles for Kane and DuPage Counties

Presenter:

Chris Minick, Director of Finance

Meeting: Government Operations Committee

Date: May 21, 2018

Proposed Cost: \$ NA

Budgeted Amount: \$

Not Budgeted: ☐**Executive Summary** *(if not budgeted please explain):*

Annual approval of Ordinance Ascertaining Prevailing Wages in the City of St. Charles for Kane and DuPage Counties. The City is filing its 2018 Prevailing Wage Ordinance using the current rates approved by and in effect with the State of Illinois, which are from September 2017. The City has an obligation to pass a Prevailing Wage Ordinance prior to June 30th of each year.

When and if the State adopts new rates for Kane and/or DuPage Counties, our Ordinance will automatically adopt the current wage rates as determined by the State's Department of Labor.

Attachments *(please list):*

Ordinance including attachments

Recommendation/Suggested Action *(briefly explain):*

Recommendation to approve an Ordinance Ascertaining Prevailing Wages in the City of St. Charles for Kane and DuPage Counties.

City of St. Charles, Illinois
Ordinance _____

**An Ordinance Ascertaining Prevailing Wages
In The City of St. Charles for Kane and DuPage Counties**

WHEREAS, in 1941, the General Assembly of the State of Illinois enacted the Prevailing Wage Act (820 ILCS 130/0.01 *et seq.*); and

WHEREAS, the Act requires that all Illinois governmental entities, including home rule units of local government, either accepts the prevailing wages determined by the Illinois Department of Labor or investigate and ascertain the prevailing rate of wages as defined in the Act for workers employed in performing work on public works construction projects in the locality in which the work is performed; and

WHEREAS, the Illinois Department of Labor has not provided specific prevailing rates of wages for landscape industry positions needed for public works construction projects; and

NOW, THEREFORE, BE IT ORDAINED THE CITY COUNCIL OF THE CITY OF ST. CHARLES, Kane and DuPage Counties, Illinois, in exercise of its home rule powers, as follows:

SECTION 1: To the extent required by the Prevailing Wage Act, the general prevailing rate of wages in this locality for laborers, mechanics and other workers engaged in construction of public works coming under the jurisdiction of the City is hereby ascertained to be, except as provided in Section 2 herein, the same as the prevailing rate of wages for construction work in the Kane and DuPage County area as determined by the Department of Labor of the State of Illinois as of September 2017, a copy of that determination being attached hereto as Exhibit A and Exhibit B. As required by the Act, any and all revisions of the prevailing rate of wages by

the Illinois Department of Labor shall supersede the Department's September 2017 determination and apply to any and all public works construction undertaken by the City of St. Charles. The definition of any terms appearing in this Ordinance, which are also used in the Act, shall be the same as in the Act.

SECTION 2: Nothing in this Ordinance shall be construed to apply the general prevailing rate of wages to any work or employment except public works construction of the City of St. Charles to the extent required by the Act.

SECTION 3: The City Clerk is hereby authorized and directed to publicly post or keep available for inspection by any interested party in the main office of the City of St. Charles this determination or any revisions of such prevailing rate of wages. A copy of this determination or of the current revised determination of prevailing rate of wages then in effect shall be attached to contract specifications as required by the Act, or, if permitted by the Act, shall be referenced in the contract specifications.

SECTION 4: The City Clerk is hereby authorized and directed to mail a copy of this determination to any employer and to any association of employers and to any person or association of employees who have filed their names and addresses requesting copies of any determination stating the particular rates and the particular class of workers whose wages will be affected by such rates.

SECTION 5: The City Clerk is hereby authorized and directed to promptly file a certified copy of this Ordinance with the Department of Labor of the State of Illinois.

SECTION 6: The City Clerk is hereby authorized and directed to cause to be published in

a newspaper of general circulation within the area notification of passage of this Ordinance. The notice of passage of this Ordinance shall mention the availability for viewing of the Ordinance in the Office of the City Clerk. The publication shall constitute notice that the determination is effective and that this is the determination of this public body.

SECTION 7: This Ordinance shall be effective upon its passage and approval according to law.

PRESENTED to the City Council of the City of St. Charles, Illinois this ____ day of June 2018.

PASSED by the City Council of the City of St. Charles, Illinois this ____ day of June 2018.

APPROVED by the Mayor of the City of St. Charles, Illinois this Illinois this ____ day of June 2018.

Raymond P. Rogina, Mayor

ATTEST:

City Clerk

COUNCIL VOTE:

Ayes:

Nays:

Absent :

Abstain:

EXHIBIT A

Prevailing Wage rates for Kane County effective Sept. 1, 2017												
Trade Title	Region	Type	Class	Base Wage	Fore-man Wage	M-F OT	OSA	OSH	H/W	Pension	Vacation	Training
ASBESTOS ABT-GEN	ALL	ALL		41.20	42.20	1.5	1.5	2	13.77	13.20	0.00	0.50
ASBESTOS ABT-MEC	ALL	BLD		37.46	39.96	1.5	1.5	2	11.62	11.06	0.00	0.72
BOILERMAKER	ALL	BLD		48.49	52.86	2	2	2	6.97	19.61	0.00	0.90
BRICK MASON	ALL	BLD		45.38	49.92	1.5	1.5	2	10.45	16.68	0.00	0.90
CARPENTER	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.88	0.00	0.63
CEMENT MASON	ALL	ALL		44.84	46.84	2	1.5	2	10.00	21.01	0.00	0.50
CERAMIC TILE FNSHER	ALL	BLD		38.56	38.56	1.5	1.5	2	10.65	11.18	0.00	0.68
COMMUNICATION TECH	N	BLD		38.15	40.55	1.5	1.5	2	12.18	12.77	0.00	0.67
COMMUNICATION TECH	S	BLD		40.15	42.55	1.5	1.5	2	11.51	11.24	0.00	1.41
ELECTRIC PWR EQMT OP	ALL	ALL		37.89	51.48	1.5	1.5	2	5.00	11.75	0.00	0.38
ELECTRIC PWR EQMT OP	ALL	HWY		41.45	56.38	1.5	1.5	2	5.50	12.87	0.00	0.73
ELECTRIC PWR GRNDMAN	ALL	ALL		29.30	51.48	1.5	1.5	2	5.00	9.09	0.00	0.29
ELECTRIC PWR GRNDMAN	ALL	HWY		32.00	56.38	1.5	1.5	2	5.50	9.92	0.00	0.66
ELECTRIC PWR LINEMAN	ALL	ALL		45.36	51.48	1.5	1.5	2	5.00	14.06	0.00	0.45
ELECTRIC PWR LINEMAN	ALL	HWY		49.67	56.38	1.5	1.5	2	5.50	15.40	0.00	0.88
ELECTRIC PWR TRK DRV	ALL	ALL		30.34	51.48	1.5	1.5	2	5.00	9.40	0.00	0.30
ELECTRIC PWR TRK DRV	ALL	HWY		33.14	56.38	1.5	1.5	2	5.50	10.29	0.00	0.59
ELECTRICIAN	N	ALL		47.29	51.69	1.5	1.5	2	14.58	15.87	0.00	0.95
ELECTRICIAN	S	BLD		47.72	51.97	1.5	1.5	2	14.81	13.36	0.00	1.67
ELEVATOR CONSTRUCTOR	ALL	BLD		51.94	58.43	2	2	2	14.43	14.96	4.16	0.90
FENCE ERECTOR	ALL	ALL		45.56	49.20	2	2	2	11.02	21.51	0.00	0.70
GLAZIER	ALL	BLD		42.45	43.95	1.5	1.5	2	14.04	20.14	0.00	0.94
HT/FROST INSULATOR	ALL	BLD		50.50	53.00	1.5	1.5	2	12.12	12.96	0.00	0.72
IRON WORKER	ALL	ALL		45.61	49.25	2	2	2	11.52	22.65	0.00	0.81
LABORER	ALL	ALL		41.20	41.95	1.5	1.5	2	13.77	13.20	0.00	0.50

LATHER	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.88	0.00	0.63
MACHINIST	ALL	BLD		45.35	47.85	1.5	1.5	2	7.26	8.95	1.85	0.00
MARBLE FINISHERS	ALL	ALL		33.95	33.95	1.5	1.5	2	10.45	15.52	0.00	0.47
MARBLE MASON	ALL	BLD		44.63	49.09	1.5	1.5	2	10.45	16.28	0.00	0.59
MATERIAL TESTER I	ALL	ALL		31.20	31.20	1.5	1.5	2	13.77	13.20	0.00	0.50
MATERIALS TESTER II	ALL	ALL		36.20	36.20	1.5	1.5	2	13.77	13.20	0.00	0.50
MILLWRIGHT	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.88	0.00	0.63
OPERATING ENGINEER	ALL	BLD	1	50.10	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	2	48.80	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	3	46.25	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	4	44.50	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	5	53.85	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	6	51.10	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	7	53.10	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	FLT		38.00	38.00	1.5	1.5	2	18.05	13.60	1.90	1.30
OPERATING ENGINEER	ALL	HWY	1	48.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	2	47.75	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	3	45.70	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	4	44.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	5	43.10	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	6	51.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	7	49.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
ORNAMNTL IRON WORKER	ALL	ALL		45.06	48.66	2	2	2	10.52	20.76	0.00	0.70
PAINTER	ALL	ALL		44.18	46.18	1.5	1.5	1.5	10.30	8.20	0.00	1.35
PAINTER SIGNS	ALL	BLD		37.45	42.05	1.5	1.5	2	2.60	3.18	0.00	0.00
PILEDRIIVER	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.88	0.00	0.63
PIPEFITTER	ALL	BLD		47.50	50.50	1.5	1.5	2	10.05	17.85	0.00	2.12
PLASTERER	ALL	BLD		42.75	45.31	1.5	1.5	2	14.00	15.71	0.00	0.89
PLUMBER	ALL	BLD		49.25	52.20	1.5	1.5	2	14.34	13.35	0.00	1.28
ROOFER	ALL	BLD		42.30	45.30	1.5	1.5	2	9.08	12.14	0.00	0.58

SHEETMETAL WORKER	ALL	BLD		45.77	47.77	1.5	1.5	2	10.65	14.10	0.00	0.82
SIGN HANGER	ALL	BLD		26.07	27.57	1.5	1.5	2	3.80	3.55	0.00	0.00
SPRINKLER FITTER	ALL	BLD		47.20	49.20	1.5	1.5	2	12.25	11.55	0.00	0.55
STEEL ERECTOR	ALL	ALL		45.56	49.20	2	2	2	11.02	21.51	0.00	0.70
STONE MASON	ALL	BLD		45.38	49.92	1.5	1.5	2	10.45	16.68	0.00	0.90
TERRAZZO FINISHER	ALL	BLD		40.54	40.54	1.5	1.5	2	10.65	12.76	0.00	0.73
TERRAZZO MASON	ALL	BLD		44.38	47.88	1.5	1.5	2	10.65	14.15	0.00	0.82
TILE MASON	ALL	BLD		45.49	49.49	1.5	1.5	2	10.65	13.88	0.00	0.86
TRAFFIC SAFETY WRKR	ALL	HWY		33.50	35.10	1.5	1.5	2	8.10	7.62	0.00	0.25
TRUCK DRIVER	ALL	ALL	1	36.30	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TRUCK DRIVER	ALL	ALL	2	36.45	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TRUCK DRIVER	ALL	ALL	3	36.65	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TRUCK DRIVER	ALL	ALL	4	36.85	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TUCKPOINTER	ALL	BLD		45.42	46.42	1.5	1.5	2	8.32	15.42	0.00	0.80

Legend

M-F OT Unless otherwise noted, OT pay is required for any hour greater than 8 worked each day, Mon through Fri. The number listed is the multiple of the base wage.

OSA Overtime pay required for every hour worked on Saturdays

OSH Overtime pay required for every hour worked on Sundays and Holidays

H/W Health/Welfare benefit

Explanations KANE COUNTY

ELECTRICIANS AND COMMUNICATIONS TECHNICIAN (NORTH) - Townships of Burlington, Campton, Dundee, Elgin, Hampshire, Plato, Rutland, St. Charles (except the West half of Sec. 26, all of Secs. 27, 33, and 34, South half of Sec. 28, West half of Sec. 35), Virgil and Valley View CCC and Elgin Mental Health Center.

The following list is considered as those days for which holiday rates of wages for work performed apply: New Years Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day and Veterans Day in some classifications/counties. Generally, any of these holidays which fall on a Sunday is celebrated on the following Monday. This then makes work performed on that Monday payable at the appropriate overtime rate for holiday pay. Common practice in a given local may alter certain days of celebration. If in doubt, please check with IDOL.

EXPLANATION OF CLASSES

ASBESTOS - GENERAL - removal of asbestos material/mold and hazardous materials from any place in a building, including mechanical systems where those mechanical systems are to be removed. This includes the removal of asbestos materials/mold and hazardous materials from ductwork or pipes in a building when the building is to be demolished at the time or at some close future date.

ASBESTOS - MECHANICAL - removal of asbestos material from mechanical systems, such as pipes, ducts, and boilers, where the mechanical systems are to remain.

CERAMIC TILE FINISHER

The grouting, cleaning, and polishing of all classes of tile, whether for interior or exterior purposes, all burned, glazed or unglazed products; all composition materials, granite tiles, warning detectable tiles, cement tiles, epoxy composite materials, pavers, glass, mosaics, fiberglass, and all substitute materials, for tile made in tile-like units; all mixtures in tile like form of cement, metals, and other materials that are for and intended for use as a finished floor surface, stair treads, promenade roofs, walks, walls, ceilings, swimming pools, and all other places where tile is to form a finished interior or exterior. The mixing of all setting mortars including but not limited to thin-set mortars, epoxies, wall mud, and any other sand and cement mixtures or adhesives when used in the preparation, installation, repair, or maintenance of tile and/or similar materials. The handling and unloading of all sand, cement, lime, tile, fixtures, equipment, adhesives, or any other materials to be used in the preparation, installation, repair, or maintenance of tile and/or similar materials. Ceramic Tile Finishers shall fill all joints and voids regardless of method on all tile work, particularly and especially after installation of said tile work. Application of any and all protective coverings to all types of tile installations including, but not be limited to, all soap compounds, paper products, tapes, and all polyethylene coverings, plywood, masonite, cardboard, and any new type of products that may be used to protect tile installations, Blastrac equipment, and all floor scarifying equipment used in preparing floors to receive tile. The clean up and removal of all waste and materials. All demolition of existing tile floors and walls to be re-tiled.

COMMUNICATIONS TECHNICIAN

Construction, installation, maintenance and removal of telecommunication facilities (voice, sound, data and video), telephone, security systems, fire alarm systems that are a component of a multiplex system and share a common cable, and data inside wire, interconnect, terminal equipment, central offices, PABX and equipment, micro waves, V-SAT, bypass, CATV, WAN (wide area network), LAN (local area networks), and ISDN (integrated system digital network), pulling of wire in raceways, but not the installation of raceways.

MARBLE FINISHER

Loading and unloading trucks, distribution of all materials (all stone, sand, etc.), stocking of floors with material, performing all rigging for heavy work, the handling of all material that may be needed for the installation of such materials, building of scaffolding, polishing if needed, patching, waxing of material if damaged, pointing up, caulking, grouting and cleaning of marble, holding water on diamond or Carborundum blade or saw for setters cutting, use of tub saw or any other saw needed for preparation of material, drilling of holes for wires that anchor material set by setters, mixing up of molding plaster for installation of material, mixing up thin set for the installation of material, mixing up of sand to cement for the installation of material and such other work as may be required in helping a Marble Setter in the handling of all material in the erection or installation of interior marble, slate, travertine, art marble, serpentine, alberene stone, blue stone, granite and other stones (meaning as to stone any foreign or domestic materials as are specified and used in building interiors and exteriors and customarily known as stone in the trade), carrara, sanionyx, vitrolite and similar opaque glass and the laying of all marble tile, terrazzo tile, slate tile and precast tile, steps, risers treads, base, or any other materials that may be used as substitutes for any of the aforementioned materials and which are used on interior and exterior which are installed in a similar manner.

MATERIAL TESTER I: Hand coring and drilling for testing of materials; field inspection of uncured concrete and asphalt.

MATERIAL TESTER II: Field inspection of welds, structural steel, fireproofing, masonry, soil, facade, reinforcing steel, formwork, cured concrete, and concrete and asphalt batch plants; adjusting proportions of bituminous mixtures.

OPERATING ENGINEER - BUILDING

Class 1. Asphalt Plant; Asphalt Spreader; Autograde; Backhoes with Caisson Attachment; Batch Plant; Benoto (requires Two Engineers); Boiler and Throttle Valve; Caisson Rigs; Central Redi-Mix Plant; Combination Back Hoe Front End-loader Machine; Compressor and Throttle Valve; Concrete Breaker (Truck Mounted); Concrete Conveyor; Concrete Conveyor (Truck Mounted); Concrete Paver Over 27E cu. ft; Concrete Paver 27E cu. ft. and Under; Concrete Placer; Concrete Placing Boom; Concrete Pump (Truck Mounted); Concrete Tower; Cranes, All; Cranes, Hammerhead; Cranes, (GCI and similar Type); Creter Crane; Spider Crane; Crusher, Stone, etc.; Derricks, All; Derricks, Traveling; Formless Curb and Gutter Machine; Grader, Elevating; Grouting Machines; Heavy Duty Self-Propelled Transporter or Prime Mover; Highlift Shovels or Front Endloader 2-1/4 yd. and over; Hoists, Elevators, outside type rack and pinion and similar machines; Hoists, One, Two and Three Drum; Hoists, Two Tugger One Floor; Hydraulic Backhoes; Hydraulic Boom Trucks; Hydro Vac (and similar equipment); Locomotives, All; Motor Patrol; Lubrication Technician; Manipulators; Pile Drivers and Skid Rig; Post Hole Digger; Pre-Stress Machine; Pump Cretes Dual Ram; Pump Cretes: Squeeze Cretes-Screw Type Pumps; Gypsum Bulker and Pump; Raised and Blind Hole Drill; Roto Mill Grinder; Scoops - Tractor Drawn; Slip-Form Paver; Straddle Buggies; Operation of Tie Back Machine; Tournapull; Tractor with Boom and Side Boom; Trenching Machines.

Class 2. Boilers; Broom, All Power Propelled; Bulldozers; Concrete Mixer (Two Bag and Over); Conveyor, Portable; Forklift Trucks; Highlift Shovels or Front Endloaders under 2-1/4 yd.; Hoists, Automatic; Hoists, Inside Elevators; Hoists, Sewer Dragging Machine; Hoists, Tugger Single Drum;

Laser Screed; Rock Drill (Self-Propelled); Rock Drill (Truck Mounted); Rollers, All; Steam Generators; Tractors, All; Tractor Drawn Vibratory Roller; Winch Trucks with "A" Frame.

Class 3. Air Compressor; Combination Small Equipment Operator; Generators; Heaters, Mechanical; Hoists, Inside Elevators (remodeling or renovation work); Hydraulic Power Units (Pile Driving, Extracting, and Drilling); Pumps, over 3" (1 to 3 not to exceed a total of 300 ft.); Low Boys; Pumps, Well Points; Welding Machines (2 through 5); Winches, 4 Small Electric Drill Winches.

Class 4. Bobcats and/or other Skid Steer Loaders; Oilers; and Brick Forklift.

Class 5. Assistant Craft Foreman.

Class 6. Gradall.

Class 7. Mechanics; Welders.

OPERATING ENGINEERS - HIGHWAY CONSTRUCTION

Class 1. Asphalt Plant; Asphalt Heater and Planer Combination; Asphalt Heater Scarfire; Asphalt Spreader; Autograder/GOMACO or other similar type machines; ABG Paver; Backhoes with Caisson Attachment; Ballast Regulator; Belt Loader; Caisson Rigs; Car Dumper; Central Redi-Mix Plant; Combination Backhoe Front Endloader Machine, (1 cu. yd. Backhoe Bucket or over or with attachments); Concrete Breaker (Truck Mounted); Concrete Conveyor; Concrete Paver over 27E cu. ft.; Concrete Placer; Concrete Tube Float; Cranes, all attachments; Cranes, Tower Cranes of all types; Creter Crane; Spider Crane; Crusher, Stone, etc.; Derricks, All; Derrick Boats; Derricks, Traveling; Dredges; Elevators, Outside type Rack & Pinion and Similar Machines; Formless Curb and Gutter Machine; Grader, Elevating; Grader, Motor Grader, Motor Patrol, Auto Patrol, Form Grader, Pull Grader, Subgrader; Guard Rail Post Driver Truck Mounted; Hoists, One, Two and Three Drum; Heavy Duty Self-Propelled Transporter or Prime Mover; Hydraulic Backhoes; Backhoes with shear attachments up to 40' of boom reach; Lubrication Technician; Manipulators; Mucking Machine; Pile Drivers and Skid Rig; Pre-Stress Machine; Pump Cretes Dual Ram; Rock Drill - Crawler or Skid Rig; Rock Drill - Truck Mounted; Rock/Track Tamper; Roto Mill Grinder; Slip-Form Paver; Snow Melters; Soil Test Drill Rig (Truck Mounted); Straddle Buggies; Hydraulic Telescoping Form (Tunnel); Operation of Tieback Machine; Tractor Drawn Belt Loader; Tractor Drawn Belt Loader (with attached pusher - two engineers); Tractor with Boom; Tractaire with Attachments; Traffic Barrier Transfer Machine; Trenching; Truck Mounted Concrete Pump with Boom; Raised or Blind Hole Drills (Tunnel Shaft); Underground Boring and/or Mining Machines 5 ft. in diameter and over tunnel, etc; Underground Boring and/or Mining Machines under 5 ft. in diameter; Wheel Excavator; Widener (APSCO).

Class 2. Batch Plant; Bituminous Mixer; Boiler and Throttle Valve; Bulldozers; Car Loader Trailing Conveyors; Combination Backhoe Front Endloader Machine (Less than 1 cu. yd. Backhoe Bucket or over or with attachments); Compressor and Throttle Valve; Compressor, Common Receiver (3); Concrete Breaker or Hydro Hammer; Concrete Grinding Machine; Concrete Mixer or Paver 7S Series to and including 27 cu. ft.;

Concrete Spreader; Concrete Curing Machine, Burlap Machine, Belting Machine and Sealing Machine; Concrete Wheel Saw; Conveyor Muck Cars (Haglund or Similar Type); Drills, All; Finishing Machine - Concrete; Highlift Shovels or Front Endloader; Hoist - Sewer Dragging Machine; Hydraulic Boom Trucks (All Attachments); Hydro-Blaster; Hydro Excavating (excluding hose work); Laser Screed; All Locomotives, Dinky; Off-Road Hauling Units (including articulating) Non Self-Loading Ejection Dump; Pump Cretes: Squeeze Cretes - Screw Type Pumps, Gypsum Bulker and Pump; Roller, Asphalt; Rotary Snow Plows; Rototiller, Seaman, etc., self-propelled; Self-Propelled Compactor; Spreader - Chip - Stone, etc.; Scraper - Single/Twin Engine/Push and Pull; Scraper - Prime Mover in Tandem (Regardless of Size); Tractors pulling attachments, Sheeps Foot, Disc, Compactor, etc.; Tug Boats.

Class 3. Boilers; Brooms, All Power Propelled; Cement Supply Tender; Compressor, Common Receiver (2); Concrete Mixer (Two Bag and Over); Conveyor, Portable; Farm-Type Tractors Used for Mowing, Seeding, etc.; Forklift Trucks; Grouting Machine; Hoists, Automatic; Hoists, All Elevators; Hoists, Tugger Single Drum; Jeep Diggers; Low Boys; Pipe Jacking Machines; Post-Hole Digger; Power Saw, Concrete Power Driven; Pug Mills; Rollers, other than Asphalt; Seed and Straw Blower; Steam Generators; Stump Machine; Winch Trucks with "A" Frame; Work Boats; Tamper-Form-Motor Driven.

Class 4. Air Compressor; Combination - Small Equipment Operator; Directional Boring Machine; Generators; Heaters, Mechanical; Hydraulic Power Unit (Pile Driving, Extracting, or Drilling); Light Plants, All (1 through 5); Pumps, over 3" (1 to 3 not to exceed a total of 300 ft.); Pumps, Well Points; Vacuum Trucks (excluding hose work); Welding Machines (2 through 5); Winches, 4 Small Electric Drill Winches.

Class 5. SkidSteer Loader (all); Brick Forklifts; Oilers.

Class 6. Field Mechanics and Field Welders

Class 7. Dowell Machine with Air Compressor; Gradall and machines of like nature.

OPERATING ENGINEERS - FLOATING

Diver. Diver Wet Tender, Diver Tender, ROV Pilot, ROV Tender

TRAFFIC SAFETY - work associated with barricades, horses and drums used to reduce lane usage on highway work, the installation and removal of temporary lane markings, and the installation and removal of temporary road signs.

TRUCK DRIVER - BUILDING, HEAVY AND HIGHWAY CONSTRUCTION Class 1. Two or three Axle Trucks. A-frame Truck when used for transportation purposes; Air Compressors and Welding Machines, including those pulled by cars, pick-up trucks and tractors; Ambulances; Batch Gate Lockers; Batch Hopperman; Car and Truck Washers; Carry-alls; Fork Lifts and Hoisters; Helpers; Mechanics Helpers and Greasers; Oil Distributors 2-man operation; Pavement Breakers; Pole Trailer, up to 40 feet; Power Mower Tractors; Self-propelled Chip Spreader; Skipman;

Slurry Trucks, 2-man operation; Slurry Truck Conveyor Operation, 2 or 3 man; Teamsters; Unskilled Dumpman; and Truck Drivers hauling warning lights, barricades, and portable toilets on the job site.

Class 2. Four axle trucks; Dump Crets and Adgetors under 7 yards; Dumpsters, Track Trucks, Euclids, Hug Bottom Dump Turnapulls or Turnatrailers when pulling other than self-loading equipment or similar equipment under 16 cubic yards; Mixer Trucks under 7 yards; Ready-mix Plant Hopper Operator, and Winch Trucks, 2 Axles.

Class 3. Five axle trucks; Dump Crets and Adgetors 7 yards and over; Dumpsters, Track Trucks, Euclids, Hug Bottom Dump Turnatrailers or turnapulls when pulling other than self-loading equipment or similar equipment over 16 cubic yards; Explosives and/or Fission Material Trucks; Mixer Trucks 7 yards or over; Mobile Cranes while in transit; Oil Distributors, 1-man operation; Pole Trailer, over 40 feet; Pole and Expandable Trailers hauling material over 50 feet long; Slurry trucks, 1-man operation; Winch trucks, 3 axles or more; Mechanic--Truck Welder and Truck Painter.

Class 4. Six axle trucks; Dual-purpose vehicles, such as mounted crane trucks with hoist and accessories; Foreman; Master Mechanic; Self-loading equipment like P.B. and trucks with scoops on the front.

TERRAZZO FINISHER

The handling of sand, cement, marble chips, and all other materials that may be used by the Mosaic Terrazzo Mechanic, and the mixing, grinding, grouting, cleaning and sealing of all Marble, Mosaic, and Terrazzo work, floors, base, stairs, and wainscoting by hand or machine, and in addition, assisting and aiding Marble, Masonic, and Terrazzo Mechanics.

Other Classifications of Work:

For definitions of classifications not otherwise set out, the Department generally has on file such definitions which are available. If a task to be performed is not subject to one of the classifications of pay set out, the Department will upon being contacted state which neighboring county has such a classification and provide such rate, such rate being deemed to exist by reference in this document. If no neighboring county rate applies to the task, the Department shall undertake a special determination, such special determination being then deemed to have existed under this determination. If a project requires these, or any classification not listed, please contact IDOL at 217-782-1710 for wage rates or clarifications.

LANDSCAPING

Landscaping work falls under the existing classifications for laborer, operating engineer and truck driver. The work performed by landscape plantsman and landscape laborer is covered by the existing classification of laborer. The work performed by landscape operators (regardless of equipment used or its size) is covered by the classifications of operating engineer. The work performed by landscape truck drivers (regardless of size of truck driven) is covered by the classifications of truck driver.

MATERIAL TESTER & MATERIAL TESTER/INSPECTOR I AND II

Notwithstanding the difference in the classification title, the classification entitled "Material Tester I" involves the same job duties as the classification entitled "Material Tester/Inspector I". Likewise, the classification entitled "Material Tester II" involves the same job duties as the classification entitled "Material Tester/Inspector II".

EXHIBIT B

Prevailing Wage rates for DuPage County effective Sept. 1, 2017												
Trade Title	Region	Type	Class	Base Wage	Fore- man Wage	M-F OT	OSA	OSH	H/W	Pension	Vacation	Training
ASBESTOS ABT-GEN	ALL	ALL		41.20	42.20	1.5	1.5	2	14.65	12.32	0.00	0.50
ASBESTOS ABT-MEC	ALL	BLD		37.46	39.96	1.5	1.5	2	11.62	11.06	0.00	0.72
BOILERMAKER	ALL	BLD		48.49	52.86	2	2	2	6.97	19.61	0.00	0.90
BRICK MASON	ALL	BLD		45.38	49.92	1.5	1.5	2	10.45	16.68	0.00	0.90
CARPENTER	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.87	0.00	0.63
CEMENT MASON	ALL	ALL		44.25	46.25	2	1.5	2	14.00	17.16	0.00	0.92
CERAMIC TILE FNSHER	ALL	BLD		38.56	38.56	1.5	1.5	2	10.65	11.18	0.00	0.68
COMMUNICATION TECH	ALL	BLD		33.38	36.18	1.5	1.5	2	12.35	19.21	1.45	0.61
ELECTRIC PWR EQMT OP	ALL	ALL		37.89	51.48	1.5	1.5	2	5.00	11.75	0.00	0.38
ELECTRIC PWR EQMT OP	ALL	HWY		41.45	56.38	1.5	1.5	2	5.50	12.87	0.00	0.73
ELECTRIC PWR GRNDMAN	ALL	ALL		29.30	51.48	1.5	1.5	2	5.00	9.09	0.00	0.29
ELECTRIC PWR GRNDMAN	ALL	HWY		32.00	56.38	1.5	1.5	2	5.50	9.92	0.00	0.66
ELECTRIC PWR LINEMAN	ALL	ALL		45.36	51.48	1.5	1.5	2	5.00	14.06	0.00	0.45
ELECTRIC PWR LINEMAN	ALL	HWY		49.67	56.38	1.5	1.5	2	5.50	15.40	0.00	0.88
ELECTRIC PWR TRK DRV	ALL	ALL		30.34	51.48	1.5	1.5	2	5.00	9.40	0.00	0.30
ELECTRIC PWR TRK DRV	ALL	HWY		33.14	56.38	1.5	1.5	2	5.50	10.29	0.00	0.59
ELECTRICIAN	ALL	BLD		39.26	43.26	1.5	1.5	2	12.35	22.08	4.93	0.68
ELEVATOR CONSTRUCTOR	ALL	BLD		51.94	58.43	2	2	2	14.43	14.96	4.16	0.90
FENCE ERECTOR	NE	ALL		39.58	41.58	1.5	1.5	2	13.40	13.90	0.00	0.40
FENCE ERECTOR	W	ALL		45.06	48.66	2	2	2	10.52	20.76	0.00	0.70
GLAZIER	ALL	BLD		42.45	43.95	1.5	1.5	2	14.04	20.14	0.00	0.94
HT/FROST INSULATOR	ALL	BLD		50.50	53.00	1.5	1.5	2	12.12	12.96	0.00	0.72
IRON WORKER	E	ALL		47.33	49.33	2	2	2	14.15	22.39	0.00	0.35
IRON WORKER	W	ALL		45.61	49.25	2	2	2	11.52	22.65	0.00	0.81
LABORER	ALL	ALL		41.20	41.95	1.5	1.5	2	14.65	12.32	0.00	0.50

LATHER	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.87	0.00	0.63
MACHINIST	ALL	BLD		45.35	47.85	1.5	1.5	2	7.26	8.95	1.85	0.00
MARBLE FINISHERS	ALL	ALL		33.95	33.95	1.5	1.5	2	10.45	15.52	0.00	0.47
MARBLE MASON	ALL	BLD		44.63	49.09	1.5	1.5	2	10.45	16.28	0.00	0.59
MATERIAL TESTER I	ALL	ALL		31.20	31.20	1.5	1.5	2	14.65	12.32	0.00	0.50
MATERIALS TESTER II	ALL	ALL		36.20	36.20	1.5	1.5	2	14.65	12.32	0.00	0.50
MILLWRIGHT	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.87	0.00	0.63
OPERATING ENGINEER	ALL	BLD	1	50.10	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	2	48.80	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	3	46.25	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	4	44.50	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	5	53.85	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	6	51.10	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	BLD	7	53.10	54.10	2	2	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	FLT		38.00	38.00	1.5	1.5	2	18.05	13.60	1.90	1.30
OPERATING ENGINEER	ALL	HWY	1	48.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	2	47.75	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	3	45.70	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	4	44.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	5	43.10	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	6	51.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
OPERATING ENGINEER	ALL	HWY	7	49.30	52.30	1.5	1.5	2	18.80	14.35	2.00	1.30
ORNAMNTL IRON WORKER	E	ALL		46.75	49.25	2	2	2	13.90	19.79	0.00	0.75
ORNAMNTL IRON WORKER	W	ALL		45.06	48.66	2	2	2	10.52	20.76	0.00	0.70
PAINTER	ALL	ALL		44.18	46.18	1.5	1.5	1.5	10.30	8.20	0.00	1.35
PAINTER SIGNS	ALL	BLD		37.45	42.05	1.5	1.5	2	2.60	3.18	0.00	0.00
PILEDRIIVER	ALL	ALL		46.35	48.35	1.5	1.5	2	11.79	18.87	0.00	0.63
PIPEFITTER	ALL	BLD		47.50	50.50	1.5	1.5	2	10.05	17.85	0.00	2.12
PLASTERER	ALL	BLD		42.75	45.31	1.5	1.5	2	14.00	15.71	0.00	0.89
PLUMBER	ALL	BLD		49.25	52.20	1.5	1.5	2	14.34	13.35	0.00	1.28

ROOFER	ALL	BLD		42.30	45.30	1.5	1.5	2	9.08	12.14	0.00	0.58
SHEETMETAL WORKER	ALL	BLD		45.77	47.77	1.5	1.5	2	10.65	14.10	0.00	0.82
SPRINKLER FITTER	ALL	BLD		47.20	49.20	1.5	1.5	2	12.25	11.55	0.00	0.55
STEEL ERECTOR	E	ALL		42.07	44.07	2	2	2	13.45	19.59	0.00	0.35
STEEL ERECTOR	W	ALL		45.06	48.66	2	2	2	10.52	20.76	0.00	0.70
STONE MASON	ALL	BLD		45.38	49.92	1.5	1.5	2	10.45	16.68	0.00	0.90
TERRAZZO FINISHER	ALL	BLD		40.54	40.54	1.5	1.5	2	10.65	12.76	0.00	0.73
TERRAZZO MASON	ALL	BLD		44.38	47.88	1.5	1.5	2	10.65	14.15	0.00	0.82
TILE MASON	ALL	BLD		45.49	49.49	1.5	1.5	2	10.65	13.88	0.00	0.86
TRAFFIC SAFETY WRKR	ALL	HWY		33.50	35.10	1.5	1.5	2	8.10	7.62	0.00	0.25
TRUCK DRIVER	ALL	ALL	1	36.30	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TRUCK DRIVER	ALL	ALL	2	36.45	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TRUCK DRIVER	ALL	ALL	3	36.65	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TRUCK DRIVER	ALL	ALL	4	36.85	36.85	1.5	1.5	2	8.10	9.76	0.00	0.15
TUCKPOINTER	ALL	BLD		44.17	45.17	1.5	1.5	2	10.45	15.04	0.00	0.88

Legend

M-F OT Unless otherwise noted, OT pay is required for any hour greater than 8 worked each day, Mon through Fri. The number listed is the multiple of the base wage.

OSA Overtime pay required for every hour worked on Saturdays

OSH Overtime pay required for every hour worked on Sundays and Holidays

H/W Health/Welfare benefit

Explanations DUPAGE COUNTY

IRON WORKERS AND FENCE ERECTOR (WEST) - West of Route 53.

The following list is considered as those days for which holiday rates of wages for work performed apply: New Years Day, Memorial Day, Fourth of July, Labor Day, Thanksgiving Day, Christmas Day and Veterans Day in some classifications/counties. Generally, any of these holidays which fall on a Sunday is celebrated on the following Monday. This then makes work performed on that Monday payable at the appropriate overtime rate for holiday pay. Common practice in a given local may alter certain days of celebration. If in doubt, please check with IDOL.

EXPLANATION OF CLASSES

ASBESTOS - GENERAL - removal of asbestos material/mold and hazardous materials from any place in a building, including mechanical systems where those mechanical systems are to be removed. This includes the removal of asbestos materials/mold and hazardous materials from ductwork or pipes in a building when the building is to be demolished at the time or at some close future date.

ASBESTOS - MECHANICAL - removal of asbestos material from mechanical systems, such as pipes, ducts, and boilers, where the mechanical systems are to remain.

TRAFFIC SAFETY - work associated with barricades, horses and drums used to reduce lane usage on highway work, the installation and removal of temporary lane markings, and the installation and removal of temporary road signs.

CERAMIC TILE FINISHER

The grouting, cleaning, and polishing of all classes of tile, whether for interior or exterior purposes, all burned, glazed or unglazed products; all composition materials, granite tiles, warning detectable tiles, cement tiles, epoxy composite materials, pavers, glass, mosaics, fiberglass, and all substitute materials, for tile made in tile-like units; all mixtures in tile like form of cement, metals, and other materials that are for and intended for use as a finished floor surface, stair treads, promenade roofs, walks, walls, ceilings, swimming pools, and all other places where tile is to form a finished interior or exterior. The mixing of all setting mortars including but not limited to thin-set mortars, epoxies, wall mud, and any other sand and cement mixtures or adhesives when used in the preparation, installation, repair, or maintenance of tile and/or similar materials. The handling and unloading of all sand, cement, lime, tile, fixtures, equipment, adhesives, or any other materials to be used in the preparation, installation, repair, or maintenance of tile and/or similar materials. Ceramic Tile Finishers shall fill all joints and voids regardless of method on all tile work, particularly and especially after installation of said tile work. Application of any and all protective coverings to all types of tile installations including, but not be limited to, all soap compounds, paper products, tapes, and all polyethylene coverings, plywood, masonite, cardboard, and any new type of products that may be used to protect tile installations, Blastrac equipment, and all floor scarifying equipment used in preparing floors to receive tile. The clean up and removal of all waste and materials. All demolition of existing tile floors and walls to be re-tiled.

COMMUNICATIONS TECHNICIAN

Low voltage installation, maintenance and removal of telecommunication facilities (voice, sound, data and video) including telephone and data inside wire, interconnect, terminal equipment, central offices, PABX, fiber optic cable and equipment, micro waves, V-SAT, bypass, CATV, WAN (wide area networks), LAN (local area networks), and ISDN (integrated system digital network), pulling of wire in raceways, but not the installation of raceways.

MARBLE FINISHER

Loading and unloading trucks, distribution of all materials (all stone, sand, etc.), stocking of floors with material, performing all rigging for heavy work, the handling of all material that may be needed for the installation of such materials, building of scaffolding, polishing if needed, patching, waxing of material if damaged, pointing up, caulking, grouting and cleaning of marble, holding water on diamond or Carborundum blade or saw for setters cutting, use of tub saw or any other saw needed for preparation of material, drilling of holes for wires that anchor material set by setters, mixing up of molding plaster for installation of material, mixing up thin set for the installation of material, mixing up of sand to cement for the installation of material and such other work as may be required in helping a Marble Setter in the handling of all material in the erection or installation of interior marble, slate, travertine, art marble, serpentine, alberene stone, blue stone, granite and other stones (meaning as to stone any foreign or domestic materials as are specified and used in building interiors and exteriors and customarily known as stone in the trade), carrara, sanionyx, vitrolite and similar opaque glass and the laying of all marble tile, terrazzo tile, slate tile and precast tile, steps, risers treads, base, or any other materials that may be used as substitutes for any of the aforementioned materials and which are used on interior and exterior which are installed in a similar manner.

MATERIAL TESTER I: Hand coring and drilling for testing of materials; field inspection of uncured concrete and asphalt.

MATERIAL TESTER II: Field inspection of welds, structural steel, fireproofing, masonry, soil, facade, reinforcing steel, formwork, cured concrete, and concrete and asphalt batch plants; adjusting proportions of bituminous mixtures.

OPERATING ENGINEER - BUILDING

Class 1. Asphalt Plant; Asphalt Spreader; Autograde; Backhoes with Caisson Attachment; Batch Plant; Benoto (requires Two Engineers); Boiler and Throttle Valve; Caisson Rigs; Central Redi-Mix Plant; Combination Back Hoe Front End-loader Machine; Compressor and Throttle Valve; Concrete Breaker (Truck Mounted); Concrete Conveyor; Concrete Conveyor (Truck Mounted); Concrete Paver Over 27E cu. ft; Concrete Paver 27E cu. ft. and Under; Concrete Placer; Concrete Placing Boom; Concrete Pump (Truck Mounted); Concrete Tower; Cranes, All; Cranes, Hammerhead; Cranes, (GCI and similar Type); Creter Crane; Spider Crane; Crusher, Stone, etc.; Derricks, All; Derricks, Traveling; Formless Curb and Gutter Machine; Grader, Elevating; Grouting Machines; Heavy Duty Self-Propelled Transporter or Prime Mover; Highlift Shovels or Front Endloader 2-1/4 yd. and over; Hoists, Elevators, outside type rack and pinion and similar machines; Hoists, One, Two and Three Drum; Hoists, Two Tugger One Floor; Hydraulic Backhoes; Hydraulic Boom Trucks; Hydro Vac (and similar equipment); Locomotives, All; Motor Patrol; Lubrication Technician; Manipulators; Pile Drivers and Skid Rig; Post Hole Digger; Pre-Stress Machine; Pump Cretes Dual Ram; Pump Cretes: Squeeze Cretes-Screw Type Pumps; Gypsum Bulker and Pump; Raised and Blind Hole Drill; Roto Mill Grinder; Scoops - Tractor Drawn; Slip-Form Paver; Straddle Buggies; Operation of Tie Back Machine; Tournapull; Tractor with Boom and Side Boom; Trenching Machines.

Class 2. Boilers; Broom, All Power Propelled; Bulldozers; Concrete Mixer (Two Bag and Over); Conveyor, Portable; Forklift Trucks; Highlift Shovels or Front Endloaders under 2-1/4 yd.; Hoists, Automatic; Hoists, Inside Elevators; Hoists, Sewer Dragging Machine; Hoists, Tugger Single Drum;

Laser Screed; Rock Drill (Self-Propelled); Rock Drill (Truck Mounted); Rollers, All; Steam Generators; Tractors, All; Tractor Drawn Vibratory Roller; Winch Trucks with "A" Frame.

Class 3. Air Compressor; Combination Small Equipment Operator; Generators; Heaters, Mechanical; Hoists, Inside Elevators (remodeling or renovation work); Hydraulic Power Units (Pile Driving, Extracting, and Drilling); Pumps, over 3" (1 to 3 not to exceed a total of 300 ft.); Low Boys; Pumps, Well Points; Welding Machines (2 through 5); Winches, 4 Small Electric Drill Winches.

Class 4. Bobcats and/or other Skid Steer Loaders; Oilers; and Brick Forklift.

Class 5. Assistant Craft Foreman.

Class 6. Gradall.

Class 7. Mechanics; Welders.

OPERATING ENGINEERS - HIGHWAY CONSTRUCTION

Class 1. Asphalt Plant; Asphalt Heater and Planer Combination; Asphalt Heater Scarfire; Asphalt Spreader; Autograder/GOMACO or other similar type machines; ABG Paver; Backhoes with Caisson Attachment; Ballast Regulator; Belt Loader; Caisson Rigs; Car Dumper; Central Redi-Mix Plant; Combination Backhoe Front Endloader Machine, (1 cu. yd. Backhoe Bucket or over or with attachments); Concrete Breaker (Truck Mounted); Concrete Conveyor; Concrete Paver over 27E cu. ft.; Concrete Placer; Concrete Tube Float; Cranes, all attachments; Cranes, Tower Cranes of all types; Creter Crane; Spider Crane; Crusher, Stone, etc.; Derricks, All; Derrick Boats; Derricks, Traveling; Dredges; Elevators, Outside type Rack & Pinion and Similar Machines; Formless Curb and Gutter Machine; Grader, Elevating; Grader, Motor Grader, Motor Patrol, Auto Patrol, Form Grader, Pull Grader, Subgrader; Guard Rail Post Driver Truck Mounted; Hoists, One, Two and Three Drum; Heavy Duty Self-Propelled Transporter or Prime Mover; Hydraulic Backhoes; Backhoes with shear attachments up to 40' of boom reach; Lubrication Technician; Manipulators; Mucking Machine; Pile Drivers and Skid Rig; Pre-Stress Machine; Pump Cretes Dual Ram; Rock Drill - Crawler or Skid Rig; Rock Drill - Truck Mounted; Rock/Track Tamper; Roto Mill Grinder; Slip-Form Paver; Snow Melters; Soil Test Drill Rig (Truck Mounted); Straddle Buggies; Hydraulic Telescoping Form (Tunnel); Operation of Tieback Machine; Tractor Drawn Belt Loader; Tractor Drawn Belt Loader (with attached pusher - two engineers); Tractor with Boom; Tractaire with Attachments; Traffic Barrier Transfer Machine; Trenching; Truck Mounted Concrete Pump with Boom; Raised or Blind Hole Drills (Tunnel Shaft); Underground Boring and/or Mining Machines 5 ft. in diameter and over tunnel, etc; Underground Boring and/or Mining Machines under 5 ft. in diameter; Wheel Excavator; Widener (APSCO).

Class 2. Batch Plant; Bituminous Mixer; Boiler and Throttle Valve; Bulldozers; Car Loader Trailing Conveyors; Combination Backhoe Front Endloader Machine (Less than 1 cu. yd. Backhoe Bucket or over or with attachments); Compressor and Throttle Valve; Compressor, Common Receiver (3); Concrete Breaker or Hydro Hammer; Concrete Grinding Machine; Concrete Mixer or Paver 7S Series to and including 27 cu. ft.;

Concrete Spreader; Concrete Curing Machine, Burlap Machine, Belting Machine and Sealing Machine; Concrete Wheel Saw; Conveyor Muck Cars (Haglund or Similar Type); Drills, All; Finishing Machine - Concrete; Highlift Shovels or Front Endloader; Hoist - Sewer Dragging Machine; Hydraulic Boom Trucks (All Attachments); Hydro-Blaster; Hydro Excavating (excluding hose work); Laser Screed; All Locomotives, Dinky; Off-Road Hauling Units (including articulating) Non Self-Loading Ejection Dump; Pump Cretes: Squeeze Cretes - Screw Type Pumps, Gypsum Bulker and Pump; Roller, Asphalt; Rotary Snow Plows; Rototiller, Seaman, etc., self-propelled; Self-Propelled Compactor; Spreader - Chip - Stone, etc.; Scraper - Single/Twin Engine/Push and Pull; Scraper - Prime Mover in Tandem (Regardless of Size); Tractors pulling attachments, Sheeps Foot, Disc, Compactor, etc.; Tug Boats.

Class 3. Boilers; Brooms, All Power Propelled; Cement Supply Tender; Compressor, Common Receiver (2); Concrete Mixer (Two Bag and Over); Conveyor, Portable; Farm-Type Tractors Used for Mowing, Seeding, etc.; Forklift Trucks; Grouting Machine; Hoists, Automatic; Hoists, All Elevators; Hoists, Tugger Single Drum; Jeep Diggers; Low Boys; Pipe Jacking Machines; Post-Hole Digger; Power Saw, Concrete Power Driven; Pug Mills; Rollers, other than Asphalt; Seed and Straw Blower; Steam Generators; Stump Machine; Winch Trucks with "A" Frame; Work Boats; Tamper-Form-Motor Driven.

Class 4. Air Compressor; Combination - Small Equipment Operator; Directional Boring Machine; Generators; Heaters, Mechanical; Hydraulic Power Unit (Pile Driving, Extracting, or Drilling); Light Plants, All (1 through 5); Pumps, over 3" (1 to 3 not to exceed a total of 300 ft.); Pumps, Well Points; Vacuum Trucks (excluding hose work); Welding Machines (2 through 5); Winches, 4 Small Electric Drill Winches.

Class 5. SkidSteer Loader (all); Brick Forklifts; Oilers.

Class 6. Field Mechanics and Field Welders

Class 7. Dowell Machine with Air Compressor; Gradall and machines of like nature.

OPERATING ENGINEER - FLOATING

Diver. Diver Wet Tender, Diver Tender, ROV Pilot, ROV Tender

TRUCK DRIVER - BUILDING, HEAVY AND HIGHWAY CONSTRUCTION

Class 1. Two or three Axle Trucks. A-frame Truck when used for transportation purposes; Air Compressors and Welding Machines, including those pulled by cars, pick-up trucks and tractors; Ambulances; Batch Gate Lockers; Batch Hopperman; Car and Truck Washers; Carry-alls; Fork Lifts and Hoisters; Helpers; Mechanics Helpers and Greasers; Oil Distributors 2-man operation; Pavement Breakers; Pole Trailer, up to 40 feet; Power Mower Tractors; Self-propelled Chip Spreader; Skipman; Slurry Trucks, 2-man operation; Slurry Truck Conveyor Operation, 2 or 3 man; Teamsters; Unskilled Dumpman; and Truck Drivers hauling warning lights, barricades, and portable toilets on the job site.

Class 2. Four axle trucks; Dump Crets and Adgetors under 7 yards; Dumpsters, Track Trucks, Euclids, Hug Bottom Dump Turnapulls or Turnatrailers when pulling other than self-loading equipment or similar equipment under 16 cubic yards; Mixer Trucks under 7 yards; Ready-mix Plant Hopper Operator, and Winch Trucks, 2 Axles.

Class 3. Five axle trucks; Dump Crets and Adgetors 7 yards and over; Dumpsters, Track Trucks, Euclids, Hug Bottom Dump Turnatrailers or turnapulls when pulling other than self-loading equipment or similar equipment over 16 cubic yards; Explosives and/or Fission Material Trucks; Mixer Trucks 7 yards or over; Mobile Cranes while in transit; Oil Distributors, 1-man operation; Pole Trailer, over 40 feet; Pole and Expandable Trailers hauling material over 50 feet long; Slurry trucks, 1-man operation; Winch trucks, 3 axles or more; Mechanic--Truck Welder and Truck Painter.

Class 4. Six axle trucks; Dual-purpose vehicles, such as mounted crane trucks with hoist and accessories; Foreman; Master Mechanic; Self-loading equipment like P.B. and trucks with scoops on the front.

TERRAZZO FINISHER

The handling of sand, cement, marble chips, and all other materials that may be used by the Mosaic Terrazzo Mechanic, and the mixing, grinding, grouting, cleaning and sealing of all Marble, Mosaic, and Terrazzo work, floors, base, stairs, and wainscoting by hand or machine, and in addition, assisting and aiding Marble, Masonic, and Terrazzo Mechanics.

Other Classifications of Work:


For definitions of classifications not otherwise set out, the Department generally has on file such definitions which are available. If a task to be performed is not subject to one of the classifications of pay set out, the Department will upon being contacted state which neighboring county has such a classification and provide such rate, such rate being deemed to exist by reference in this document. If no neighboring county rate applies to the task, the Department shall undertake a special determination, such special determination being then deemed to have existed under this determination. If a project requires these, or any classification not listed, please contact IDOL at 217-782-1710 for wage rates or clarifications.

LANDSCAPING

Landscaping work falls under the existing classifications for laborer, operating engineer and truck driver. The work performed by landscape plantsman and landscape laborer is covered by the existing classification of laborer. The work performed by landscape operators (regardless of equipment used or its size) is covered by the classifications of operating engineer. The work performed by landscape truck drivers (regardless of size of truck driven) is covered by the classifications of truck driver.

MATERIAL TESTER & MATERIAL TESTER/INSPECTOR I AND II

Notwithstanding the difference in the classification title, the classification entitled "Material Tester I" involves the same job duties as the classification entitled "Material Tester/Inspector I". Likewise, the classification entitled "Material Tester II" involves the same job duties as the classification entitled "Material Tester/Inspector II".

	AGENDA ITEM EXECUTIVE SUMMARY		Agenda Item number: 5b
	Title:	Recommendation to Appoint Assurance Agency as the City's Risk Insurance Consultant and Broker at a Cost of \$32,500 Annually for the Five Annual Renewal Periods Beginning December 1,	
	Presenter:	Chris Minick, Finance Director	
Meeting: Government Operations Committee		Date: May 21, 2018	
Proposed Cost: \$32,500		Budgeted Amount: \$ 36,320	Not Budgeted: <input type="checkbox"/>
<p>Executive Summary <i>(if not budgeted please explain):</i></p> <p>The City currently uses Assurance Companies from Schaumburg, IL as our current broker and consultant for our risk insurance package. The contract with Assurance expires in June of 2018. The risk insurance package for the City includes property, liability, automobile, cyber liability, and excess workers compensation lines of coverage. The cost of these coverages approximates \$600,000 annually.</p> <p>The City sent requests for proposals (RFP's) to 4 firms soliciting proposals for brokerage and consultant services for the City. Due to the nature and specialization of municipal risk and limited coverage markets, staff solicited a proposal for a 5 year renewal period beginning December 1, 2018. Additionally, staff is looking to establish a strategic risk management strategy and to continue the City's cost containment efforts over a long term basis. We received 3 proposal responses. The respondents were interviewed by a staff team of 3 individuals; Chris Minick, Finance Director; Joan Schouten, Purchasing Division Manager; and Carylie Forte, Senior Administrative Assistant and main point of contact for risk insurance claims and issues. The panel was unanimous in its decision to select Assurance.</p> <p>The responses included costs as follows:</p> <ul style="list-style-type: none"> • Arthur J. Gallagher and Co, \$28,500 annually; • Wine Sergi \$30,000 annually; • Assurance Agency \$32,500 annually. <p>While cost is a factor in the decision, viable options and advice, visioning, strategy, claims advocacy, and loss prevention programs are also key considerations that can provide value to the overall risk insurance program in excess of money spent on consulting services. Assurance provides value over and above the minor difference in the annual service fee. They have provided approximately \$215,000 in savings over the past 4 years serving as the City's risk insurance consultant. Please see the attached memo for additional discussion on the value added services that Assurance provides.</p> <p>After review of the proposals and the interview process, Staff's unanimous recommendation is to name Assurance Agency as the City's risk insurance consultant and broker at a cost of \$32,500 annually for a five year period beginning with the 2018 renewal process. Work on the 2018 renewal process will commence in June.</p>			
<p>Attachments <i>(please list):</i></p> <ul style="list-style-type: none"> • Scoring Sheet • Selection Memo 			
<p>Recommendation/Suggested Action <i>(briefly explain):</i></p> <p>Recommendation to Appoint Assurance Agency as the City's Risk Insurance Consultant and Broker at a Cost of \$32,500 Annually for the Five Annual Renewal Periods Beginning December 1, 2018</p>			

May 15, 2018

To: Mayor Rogina and the City Council

From: Chris Minick, Finance Director

Subject: Risk Insurance Consultant Selection

Enclosed in the packet is a request and recommendation to select Assurance Agency, Ltd of Schaumburg as the City's Risk Insurance Consultant and Broker. Although they are not the firm providing the lowest quote for service fees, they offer the best value for the fees quoted. The fee paid to the broker/consultant is not where the true costs of the risk insurance program are present. Viable coverage and carrier options, claims advice, visioning, strategy, claims advocacy, and loss prevention programs are key considerations that can provide value to the overall risk insurance program in excess of money spent on consulting services. Assurance has a track record of providing savings on the actual premium dollars expended as well as providing value added services resulting in a lower overall total cost of the City's risk insurance program.

The service and advice that Assurance has provided over our four (4) year partnership has been outstanding. In addition, Assurance has been able to generate approximately \$215,369 in premium savings while enhancing the City's risk insurance program over that time frame.

Assurance has been the City's broker since the 2014 renewal. After familiarizing themselves with City operations and risk exposures for a year, Assurance marketed the City's risk insurance program for the 2015 renewal and the City's liability package was changed to Traveler's. Premium savings on the 2015 risk insurance renewal of \$95,795 resulted based on Assurance's efforts and the change to Traveler's. The next renewal yielded premium costs that were \$70,618 below 2014 levels. For the 2017 renewal, savings of \$48,956 were realized as compared to 2014 premium levels.

In addition to generating the premium savings as noted, Assurance was also able to secure increases in coverage levels in conjunction with those premiums savings. The deductible level on automobile coverage was reduced from \$25,000 to \$10,000. Additional values of approximately \$11 million were added to the City's property coverage, \$1 million was added to the City's umbrella policy limit, and additional coverage was added to the City's liability coverage for the electric utility in the event that the electric utility was unable to provide service.

In addition to the "hard costs" and additional coverages obtained by Assurance, they have also provided value-added services for the risk insurance process in many areas and instances:

- Assurance has helped us recover losses by subrogating on the City's behalf on automobile claims with a value of less than \$10,000. This has helped the City recover funds to repair City vehicles in minor vehicle accidents where the City is not at fault. Insurance carriers do not typically subrogate on their client's behalf if the value of the claim is lower than the deductible level. Assurance has filled that gap on the City's behalf.
- Assurance has also advised and assisted in verifying that we have proper indemnification and "proof of insurance" protocols to avoid inadvertently taking on additional risk.
- Assurance helped us re-vamp our indemnification and insurance process and protocols for the rental of the City's shooting range to outside law enforcement agencies.

- Assurance has provided invaluable advice on assisting with the handling and processing of various liability claims.
- During our recent officer involved shooting, Assurance was able to advise in the proper handling of the initial phases of the incident from a potential liability/insurance standpoint and helped us interact with Traveler's to get their concurrence on selection of preferred counsel.
- Assurance has helped us to implement and refine Cyber liability coverage to minimize potential City liability.
- From an administrative standpoint, Assurance has streamlined the annual renewal process by providing pre-completed forms for the City's review based on the prior year's activities and risk exposure. This step saves City staff time in performing this process each year.

Staff is recommending selection of Assurance Agency as the City's risk insurance broker/consultant at a cost of \$32,500 annually for a five year contract period beginning with the 2018 renewal process which will commence this spring/summer. Although not the lowest in price in terms of an annual service fee, Assurance has been a respected and valued partner for the past four years and they have added value to the City's risk insurance process far beyond the minor difference in fees quoted.

INSURANCE BROKER RFP SCORING

CONSULTANT	Points Possible	Average Score
<u>WINE SERGI</u>		
Experience	25	18
Qualifications	25	18
Project Approach	25	13
References	10	4
Cost	15	9
Total	100	63
<u>ASSURANCE</u>		
Experience	25	25
Qualifications	25	25
Project Approach	25	24
References	10	10
Cost	15	12
Total	100	96
<u>AJ GALLAGHER</u>		
Experience	25	25
Qualifications	25	22
Project Approach	25	21
References	10	9
Cost	15	13
Total	100	91

**AGENDA ITEM EXECUTIVE SUMMARY**

Agenda Item number: 5c

Title:

Recommendation to approve Funds Transfer Resolutions Authorizing Budgeted Transfers in the Aggregate Amount of \$2,652,427.73 for Miscellaneous Transfers.

Presenter:

Christopher Minick

Meeting: Government Operations Committee

Date: May 21, 2018

Proposed Cost: \$

Budgeted Amount: \$2,652,427.73

Not Budgeted: ☐

Executive Summary (*if not budgeted please explain*):

During the fiscal year, interfund transfers are sometimes necessary to fund activities/transactions in other funds. Most City revenues are recorded into the General Fund and transfers are periodically made to fund debt service payments, subsidize the activities of other funds, or for a special use. Funds Transfer Requests:

Fiscal Year 17/18:

Transfer of funds from the General Fund (100) to the Capital Projects Fund (513) for Budget Capital Improvements; Transfer of Funds from the Capital Improvement Levy Fund (501) to the TIF 7 Capital Project Fund (507) for TIF 7 Capital Improvements; and Transfer of funds from the General Fund (100) to the Electric Fund (200) for Streetlight Maintenance Costs, from the General Fund (100) to the Electric Fund (200) for Christmas decorating costs, and from the General Fund (100) to the Replacement Fund (520) for equipment replacements.

Attachments (*please list*):

Funds Transfer Resolution

Recommendation/Suggested Action (*briefly explain*): Recommendation to approve Funds Transfer Resolutions authorizing budgeted transfers in the aggregate amount of \$2,652,427.73 for miscellaneous transfers

Funds Transfer Resolution

No. _____

BE IT RESOLVED that the Finance Director and City Treasurer of the City of St. Charles be and are hereby authorized to make the following transfers during FY 17/18 and as shown in the budget during that year:

<u>Amount</u>	<u>From Fund</u>	<u>To Fund</u>	<u>Purpose</u>
\$ 2,004,939.00	100-General Fund	513-Capital Projects Fund	For budgeted capital improvements
\$ 116,980.00	501-Capital Improvement Levy Fund	507-TIF 7 Capital Project Fund	For TIF 7 capital improvements
\$ 220,251.63	100-General Fund	200-Electric Fund	For streetlight maintenance costs
\$ 15,286.10	100-General Fund	200-Electric Fund	For Christmas decorating costs
\$ 294,971.00	100-General Fund	520-Replacement Fund	For equipment replacements
TOTAL: \$2,652,427.73			

THIS IS TO CERTIFY THAT THE ABOVE TRANSFER RESOLUTION was adopted by the City Council of the City of St. Charles, Illinois, at the meeting held on the _____ day of _____, 2018.

Charles Amenta, City Clerk

(SEAL)