



CITY OF ZION

SPECIAL EVENT PERMIT APPLICATION

2828 Sheridan Road, Zion, IL 60099

847-746-4012 - FAX 847-746-7167

www.cityofzion.com

FEES:

Venue		
<u>Occupancy</u>		
500 persons or less	Not for Profit	\$ 5.00 _____
	For Profit	\$ 25.00 _____
More than 500 persons but less than 5,000 persons	Not for Profit	\$ 25.00 _____
	For Profit	\$ 125.00 _____
More than 5,000 persons	Not for Profit	\$ 250.00 _____
	For Profit	\$1,250.00 _____
AMOUNT DUE:		\$ _____

Temporary Road Closure Permits and Sound Amplifier Permits require a separate application.

No Permit will be issued without written proof of not for profit status (501C3), if applicable.

PERMIT IS VALID FOR FOUR (4) CONSECUTIVE DAYS OR LESS

GENERAL INFORMATION:

Sponsoring Organization:	
Address:	
Contact No.:	State Tax ID No.:
Event Type/Name:	
Event Location:	
Date(s) of Event(s):	

ADDITIONAL INFORMATION:

Details of Security Plan:
Details of Restroom Facilities:
Details of Parking Plan:
Describe any special circumstances that may apply:

PLACE A CHECK NEXT TO ALL THAT APPLY:

Special Event Status: <input type="checkbox"/> For Profit <input type="checkbox"/> Not-for-Profit – (Must provide 501C3 proof)	<input type="checkbox"/> Food served (Must provide a copy of Lake County Health Department Permit)
<input type="checkbox"/> This event is open to the General Public	<input type="checkbox"/> Certificate of Liability Insurance is attached. (Minimum of \$1,000)
This event will be held: <input type="checkbox"/> Within a Building <input type="checkbox"/> Outside <input type="checkbox"/> Tent	<input type="checkbox"/> Parking Plan attached
<input type="checkbox"/> Temporary Road Closure Permit needed (separate application) <input type="checkbox"/> Sound Amplifier Permit needed (separate application)	<input type="checkbox"/> Security Plan attached

EVENTS TO BE HELD ON PRIVATE PROPERTY REQUIRE PROPERTY OWNER APPROVAL

Property Owner Name:	
Contact No.:	Fax No.:
Property Owner Signature:	

Hold Harmless Statement: The applicant hereby agrees to indemnify and hold harmless the City of Zion, its Corporate Authorities, officers, agents, and employees from and against any and all claims, suits, damage, causes of action, judgments, loss, costs, expenses, and attorney's fees arising out of personal injury, including death, property loss or theft sustained by any person on the premises during or as a result of the applicant's permission to hold an activity/event.

I hereby further certify that the information provided in this application is true and correct to the best of my knowledge and that I have not provided false or misleading information. I understand the failure to supply adequate or correct information will be subject to revocation of permission to hold such an activity/event.

Applicant Signature _____
Date

Print Applicant's Name and Title

- ❖ **Please note that approval of this permit does not indicate approval of any other required permits.**
- ❖ **All license fees are non-refundable.**

Every City of Zion special event permit holder desiring to engage special event vendors of food or merchandise during the course of the event for which they hold a permit shall be held responsible for the application of these vendors to obtain a permit to operate in the City. Special event permit holders shall submit to the City Clerk, on behalf of the special event vendor, an application furnished by the City Clerk. The special event permit holder shall pay a \$25.00 administrative fee to the City of Zion for **each** of the special event vendors who submit an application. No administrative fee shall be owed the City if the special event vendor applicant is: 1) a currently licensed Zion business 2) a public government entity or 3) if the entertainment event is sponsored by the City of Zion or any public government entity. (Zion Code Sections 14-202 & 205) Permits will be mailed directly to the vendor, unless otherwise specified.

(For Office Use Only)

Date: _____ Total Amount Paid: _____ Permit No. _____
 Receipt No.: _____