



SPECIAL EVENT PERMIT GUIDELINES

Thank you for your interest in holding a Special Event within the City of Lake Forest. A Special Event Application is required when a community event is located in whole or in part, on public property (or on private property within the City when it may have a direct effect upon public property, traffic flow, or public health or safety, and which may require the use of special City Services). Requested dates, times, and locations are considered on a first-come, first-served basis, pending staff and in some instances, City Council review, recommendations, and approval. Additional Permits may also be required to secure the Event.

The City's Special Event Policy and All Related Applications May Be Viewed at:
[https://www.cityoflakeforest.com/Special Events](https://www.cityoflakeforest.com/Special%20Events)

If you have any questions or concerns, please contact Community Development (847)-234-2600 x2

TO BEST UNDERSTAND THE SCOPE OF YOUR EVENT AND TO ALLOW TIMELINESS FOR THE REVIEW AND APPROVAL PROCESS, PLEASE SUBMIT THE FOLLOWING REQUIREMENTS TO CITY HALL NO LATER THAN 90 DAYS PRIOR TO THE EVENT

- **COMPLETE & SIGNED SPECIAL EVENT APPLICATION** - Submit with \$50 Processing Fee. ***(Please note – Applications received less than 90 days prior to proposed event date, may incur additional penalty fees)***
- **CERTIFICATE OF INSURANCE** - Required in the minimum general aggregate amount of \$1,000,000, naming the City of Lake Forest as Certificate Holder and as Additionally Insured. ***(See Example)***
- **SITE PLAN** – Required at time of application. The proposed site plan is subject to modification, pending review and approval of City Staff. In some instances, City Council approval may be required. ***(See Example)***
- **PARADE/RACE ROUTE** – Required at time of application. The proposed route is subject to modification, pending review and approval of City Staff. In some instances, City Council approval may be required. ***(See Example)***
- **STREET CLOSURE REQUESTS** – Required at time of application. Proposed closure(s) require review and approval of City Staff, and in some instances, may require City Council approval.
- **PARKING PLAN** - Should be included in the application and is subject to modification, pending review and approval of City Staff.
- **CITY SERVICES REQUESTS** - Required at time of application to allow sufficient time for staff scheduling/coverage. City Services include, but are not limited to: Police/Fire Personnel, Traffic Control, Barricades, Cones, Litter Barrels, Dumpsters, Bleachers, etc.

ADDITIONAL PERMITS

City Hall (220 E. Deerpath)

- **LIQUOR LICENSE APPLICATION** - Required if alcohol will be present at the event. Complete Application, Certificate of Insurance, and Fee should be submitted to City Hall, no fewer than 2 weeks prior to the event. Please contact the Deputy Clerk with questions, 847-810-3676.
- **RAFFLE LICENSE APPLICATION** - Required if a raffle will be conducted within City limits. Complete Application and Fee should be submitted to City Hall, no fewer than 2 weeks prior to the event. Please call 847-810-3676 with questions.

Community Development (800 Field Drive)

- **SPECIAL EVENT INSPECTION PERMIT APPLICATION/LIFE SAFETY INSPECTION** - May be required on public or private property where the property normally requires an Annual Fire Inspection, depending on the nature and scope of the event. Some factors include, but are not limited to: number of attendees, cooking, or other uses of the property. Please contact Community Development Department with questions 847-234-2600x2.
- **TENT PERMIT APPLICATION** - Required for all tents larger than 10' x 10', on public or private property, where the property normally requires an Annual Fire Inspection. The Tent Contractor should submit a completed application and final site plan/layout and permit fees paid in full, no fewer than 2 weeks prior to the event. Please contact Community Development Department at 847-234-2600 x2 with questions.
- **INFLATABLE AMUSEMENTS and CARNIVAL RIDE PERMIT APPLICATION** – Required for events on public or private property where the property normally requires an Annual Fire Inspection. The Amusement Contractor must submit complete application and required documents to the Community Development Department no fewer than 2 weeks prior to the event. An Illinois Department of Labor Inspection Report for each ride or attraction and a Certificate of Insurance naming the City of Lake Forest as additionally insured must be submitted at time of application. Please contact Community Development Department at 847-234-2600 x2 with questions.

Fire (255 W. Deerpath)

- **FIREWORKS and PYROTECHNICS DISPLAYS APPLICATION** - Should be completed by the Fireworks Contractor and submitted to the Fire Department, no fewer than 2 weeks prior to the event. A Certificate of Insurance naming the City of Lake Forest and the Lake Forest Fire Department as additionally insured must be submitted at time of application. Please contact the Fire Department at 847-810-3867 with questions.
- **BONFIRE & CEREMONIAL BURNS APPLICATION** - Should be submitted to the Lake Forest Fire Department, no fewer than 2 weeks prior to the requested burn date. If you have any questions, please contact the Fire Prevention Bureau at 847-810-3891. Please note: the Ceremonial Fire Pit at the Lakefront must first be reserved through the Recreation Department, prior to Fire Department Approval.

Parks and Recreation (400 E. Hastings Road)

- **PARK FACILITY/PAVILION RESERVATION FORM** - Applications should be submitted to the Lake Forest Recreation Department. Please call 847-234-6700 with questions.
- **BEACH PAVILION RESERVATION FORM** – Applications should be submitted to the Lake Forest Recreation Department. Please call 847-234-6700 with questions.

Lake County Health Department

- **FOOD VENDOR INSPECTION/PERMIT** - May be required if there will be food vendors present at the event. Event Coordinator is responsible for contacting The City of lake Forest at 847-234-2600x2 and the Lake County Health Department at 847-377-8040.



SPECIAL EVENT PERMIT APPLICATION

Event Information:

☐ **New**

☐ **Annual**

Event Name: _____

Event Date(s): _____

Event Location: _____

Event Start Time: _____ Event End Time: _____

Event Set-up Date: _____ Time: _____ Event Tear Down Date: _____ Time: _____

Estimated Attendance: _____ Estimated Number of Vehicles: _____

Please Note: Events Proposed to Take Place in Market Square or on Any Private Property Require Prior Written Consent and Approval from the Property Owner. (Approval Letter must be presented at Time of Application).

Sponsoring Organization:

Name: _____

Address: _____

Phone #: _____

Fax #: _____

E-Mail: _____

Event Coordinator(s):

Name/Title: _____

Address: _____

Phone #: _____ Cellular #: _____

E-Mail: _____

Name/Title: _____

Address: _____

Phone #: _____ Cellular #: _____

E-Mail: _____

Please Indicate Which of the Following Best Describes Your Event and **Attach Proposed Site Plan/Route Map**

- ☐ Carnival/Festival/Fair ☐ Walk/Run/Bike Ride ☐ Parade ☐ Concert
- ☐ Other _____

Please Mark All Items Below that Pertain to Your Event: **Items with *Asterisks* Require Additional Permits** (See Special Event Permit Application Guidelines for Further Information)

- | | | | |
|---|--|---------------------------------------|--|
| <input type="checkbox"/> Food Vendors* | <input type="checkbox"/> Tents* | <input type="checkbox"/> Fireworks* | <input type="checkbox"/> Music |
| <input type="checkbox"/> Liquor* | <input type="checkbox"/> Carnival Rides* | <input type="checkbox"/> Bonfire* | <input type="checkbox"/> Beach Pavilion* |
| <input type="checkbox"/> Raffle* | <input type="checkbox"/> Inflatable Amusements* | <input type="checkbox"/> Cooking* | <input type="checkbox"/> Park Pavilion* |
| <input type="checkbox"/> Portable Washrooms | <input type="checkbox"/> Washroom "Trailer" with Water Hook-Up | <input type="checkbox"/> Generator(s) | |

If Your Event Requires Any of the Following, Please Provide Proposed Plans:

Off Site Parking

- ☐ City Streets _____
- _____
- ☐ City Parking Lot (***CITY HALL, FOREST AVE, OAKWOOD, MCKINLEY, NORTH SHORE, WESTMINSTER, QUARTA, METRA***)
- _____
- Private Parking Lot _____
- _____
- ☐ Shuttle Service _____
- _____

Traffic Control

- ☐ Officer(s) Requested _____
- _____
- ☐ Course Marshall(s) Present _____
- _____

Roadway(s)

- ☐ Barricade(s) _____
- _____
- ☐ Closure(s) _____
- _____

Directional/Route/Other Signage

- ☐ Number of Signs _____
- ☐ Dimensions _____
- ☐ Desired Location(s) For Placement _____

PLEASE INDICATE CITY SERVICES REQUESTED (if applicable):

<u>Department</u>	<u>Fee</u>	<u># Requested</u>	<u>Date(s)/Time(s) Requested</u>	<u>Total Cost</u>
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POLICE (2 Hour Minimum)

Officer	Per current Police contract	_____	_____	_____
Police Vehicle	\$110.00 each	_____	_____	_____
No Parking Signs	_____	N/A	_____	N/A

Staff Comments/Recommendations:

<u>Department</u>	<u>Fee</u>	<u># Requested</u>	<u>Date(s)/Time(s) Requested</u>	<u>Total Cost</u>
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FIRE (2 Hour Minimum)

Firefighter/ Paramedic	Per current Fire Dept ontract	_____	_____	_____
Fire Vehicle	\$110.00 each	_____	_____	_____

Staff Comments/Recommendations:

<u>Department</u>	<u>Fee</u>	<u># Requested</u>	<u>Date(s)/Time(s) Requested</u>	<u>Total Cost</u>
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STREETS

<input type="checkbox"/> Barricades (1-10)	\$40.00	_____	_____	_____
<input type="checkbox"/> A-Frame Barricades	\$5.00 Each	_____	_____	_____
<input type="checkbox"/> Parking Cones	\$1.00 Each	_____	_____	_____
<input type="checkbox"/> Street Closure Signs	N/A	_____	_____	N/A
<input type="checkbox"/> Handicap Parking Signs	N/A	_____	_____	N/A

Staff Comments/Recommendations:

<u>Department</u>	<u>Fee</u>	<u># Requested</u>	<u>Date(s)/ Time(s) Requested</u>	<u>Total Cost</u>
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BUILDING MAINTENANCE

<input type="checkbox"/> Electrical Cords	\$25 each	_____	_____	_____
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Staff Comments/Recommendations:

PLEASE INDICATE CITY SERVICES REQUESTED (if applicable):

<u>Department</u>	<u>Fee</u>	<u># Requested</u>	<u>Date(s)/ Time(s) Requested</u>	<u>Total Cost</u>
<i>PARKS/RECREATION</i>				
<input type="checkbox"/> Litter Barrels	\$14.00 Each	_____	_____	_____
<input type="checkbox"/> Picnic Tables	\$32.00 Each	_____	_____	_____
<input type="checkbox"/> Grills	\$195.00	_____	_____	_____
<input type="checkbox"/> Bleachers (Keep in Park)	\$ 50.00	_____	_____	_____
(Move to other Location)	\$195.00	_____	_____	_____

Staff Comments/Recommendations:

Please Note: The City reserves the right to require that a certain number of police officers and firefighter/paramedics attend the special event, and reserves the right to bill the event organizer accordingly. The City also reserves the right to require that a certain amount of City equipment, such as barricades or litter barrels be required for the special event, and reserves the right to bill the event organizer accordingly.

The City of Lake Forest, as the Authority having Jurisdiction, in conjunction with the Fire and Police Departments reserves the right to create an Incident Action Plan on large scale Special Events or as deemed necessary to protect the Health and Life Safety of the residents and the people that visit our community.

GRAND TOTAL \$_____

CONDITIONS, LIABILITY WAIVER, & HOLD HARMLESS AGREEMENT

1. Conditions:

The undersigned hereby makes application for permission to hold a special event in The City of Lake Forest. It is understood that all City ordinances and codes shall be adhered to, and that any violation of a City ordinance, code, or State Statute shall mean automatic revocation of this permit. It is further understood that this permit shall be void if the applicant does not comply with all requirements specified by the Office of the City Manager, as part of the approval process.

2. Release From Liability:

"I agree to waive and relinquish any and all claims I may have arising out of, connected with, or in any way associated with the activities of the special event. I do hereby fully release and discharge The City of Lake Forest, its officers, agents, and employees from any and all claims from injuries, including death, damage, or loss which I or my organization may have, or which may occur in connection with the special event."

3. Indemnity & Defense:

"I further agree to indemnify, hold harmless, and defend The City of Lake Forest, its officers, agents, and employees from any and all claims from injuries, including death, damages and losses sustained by me, or my organization, or any other person connected with, or in any way associated with the activities of the special event."

4. Human Trafficking Notice:

Pursuant to the Human Trafficking Resource Center Notice Act, 775 ILCS 50/5, an organizer of a public gathering or special event that is conducted on property open to the public and that requires the issuance of a permit from a unit of local government must post a notice that complies with the Act. The Applicant acknowledges and agrees that if the Act applies to the special event that is the subject of this application, the Applicant will comply with the Act by posting the required notice in a conspicuous and accessible place in or about the premises in clear view of the public and employees where similar notices are customarily posted. A sample notice can be found on the Illinois Department of Human Services' website at:

<https://www.dhs.state.il.us/page.aspx?item=82023>.

Signature of Applicant: _____ ***Date:*** _____

For Staff Use Only:

Date Received _____

Date Approved _____

Event Classification _____

CONDITIONS OF APPROVAL



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY 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

EXAMPLEFAX
(A/C, No):

COVERAGE

NAIC #

INSURED

SPONSORING ORGANIZATION
ADDRESS
CITY, STATE, ZIP CODE

INSURER B:

INSURER C:

INSURER D:

INSURER E:

INSURER F:

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 SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
	GENERAL LIABILITY					
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	<input checked="" type="checkbox"/>				EACH OCCURRENCE \$
	<input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$
						MED EXP (Any one person) \$
						PERSONAL & ADV INJURY \$
						GENERAL AGGREGATE \$ 1,000,000.00
	GEN'L AGGREGATE LIMIT APPLIES PER:					PRODUCTS - COMP/OP AGG \$
	POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/>					\$
	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				PROPERTY DAMAGE (Per accident) \$
						\$
	UMBRELLA LIAB	<input type="checkbox"/> OCCUR				EACH OCCURRENCE \$
	EXCESS LIAB	<input type="checkbox"/> CLAIMS-MADE				AGGREGATE \$
						\$
	DED RETENTIONS					WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/>
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					E.L. EACH ACCIDENT \$
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below	<input type="checkbox"/> Y/N <input type="checkbox"/> N/A				E.L. DISEASE - EA EMPLOYEE \$
						E.L. DISEASE - POLICY LIMIT \$

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

THE CITY OF LAKE FOREST IS ADDITIONALLY INSURED WITH RESPECTS TO GENERAL LIABILITY

(EVENT NAME, DATE, LOCATION)

CERTIFICATE HOLDER

CANCELLATION

THE CITY OF LAKE FOREST
220 E DEERPATH
LAKE FOREST, IL 60045

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

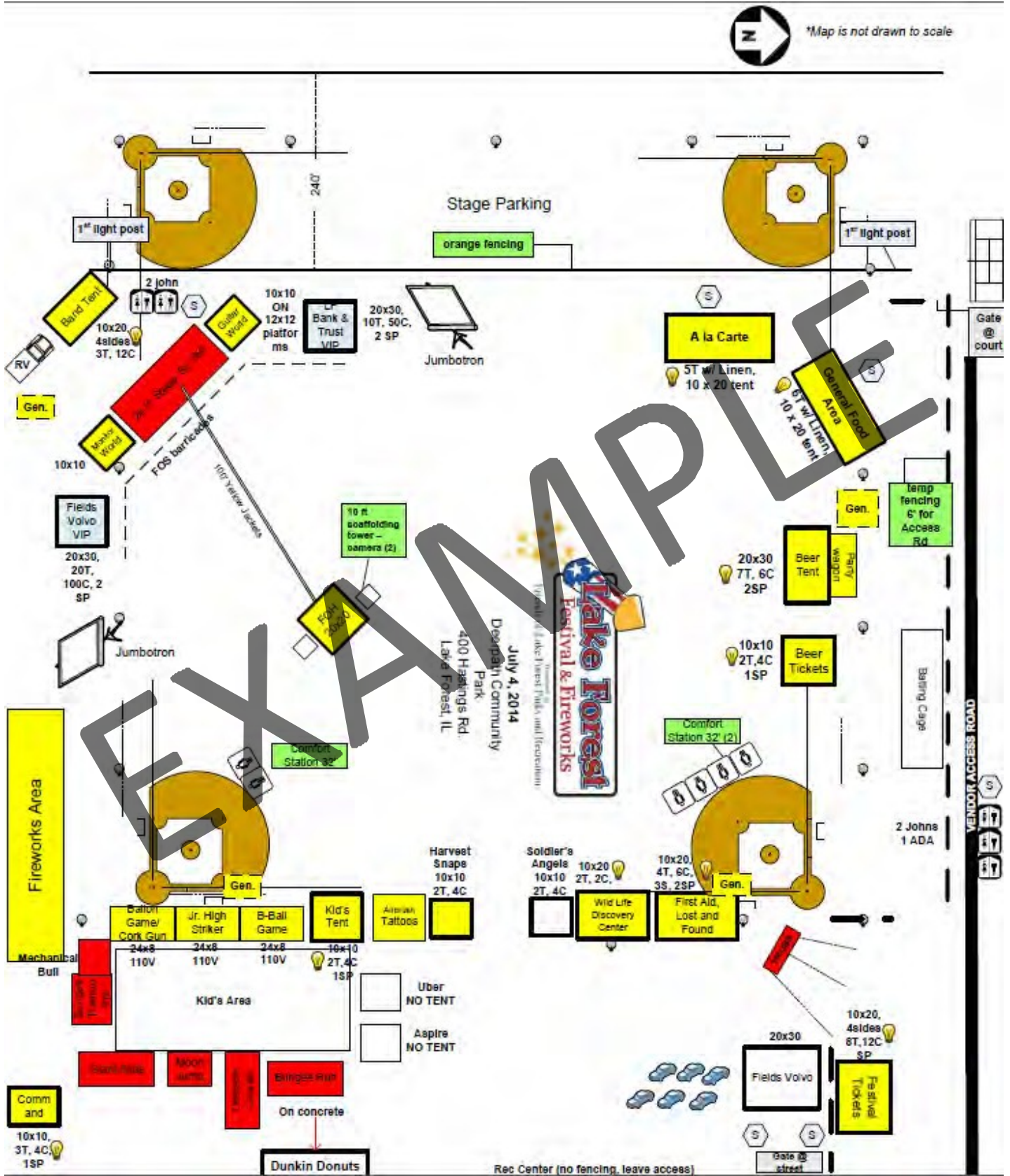
AUTHORIZED REPRESENTATIVE

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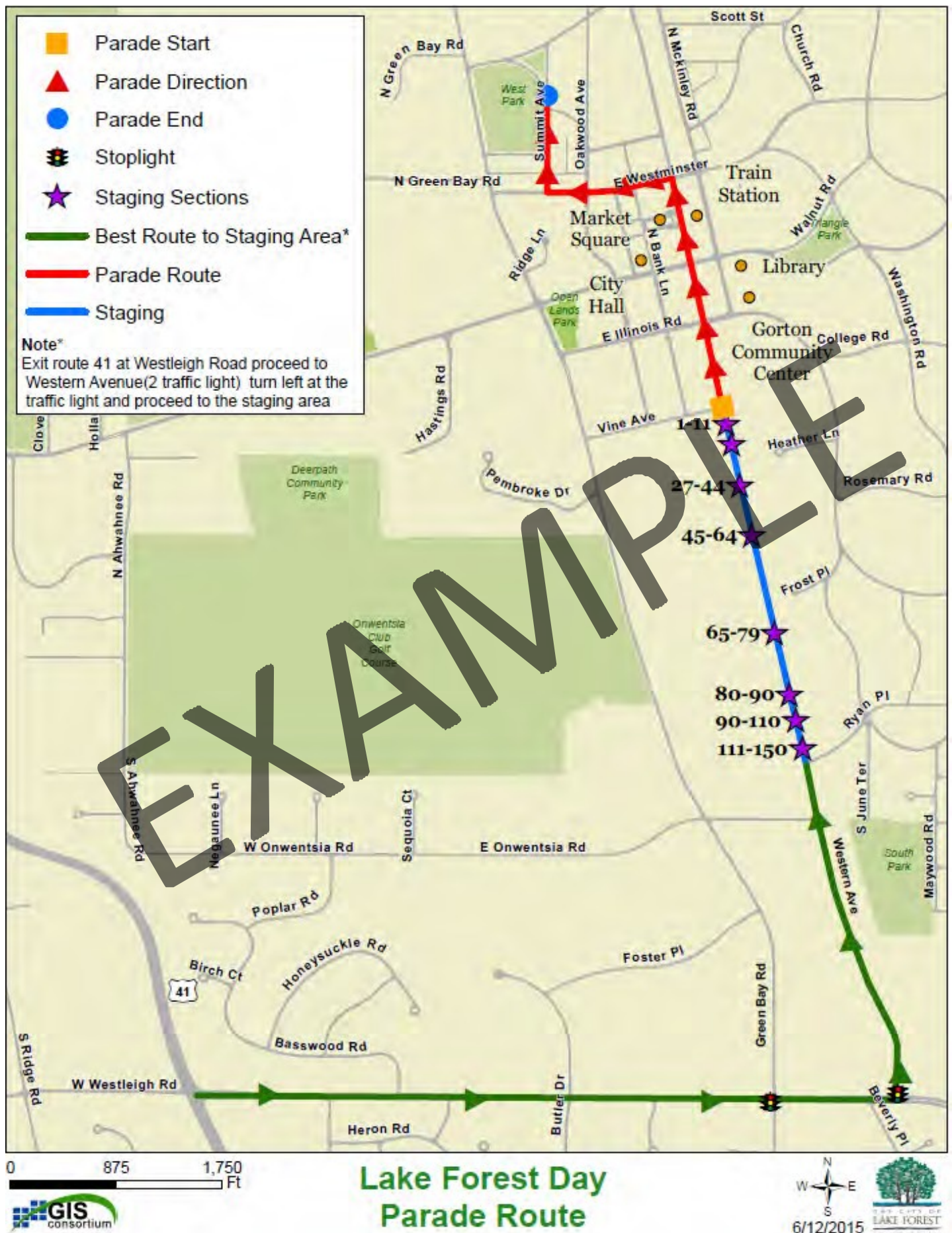
ACORD 25 (2010/05)

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EXAMPLE SITE PLAN







EXAMPLE SITE PLAN – PARADE ROUTE






TWILIGHT 5K RUN WALK & ROLL COURSE MAP



 **GORTON COMMUNITY CENTER, 400 E. ILLINOIS ROAD, LF**

 **FIRST AID STATIONS**  **WATER STATION**  **MILE MARKERS**

EMERGENCY FLAG NOTIFICATION: (Located at First Aid Stations)

	WHITE	CONDITIONS GOOD, PROCEED
	YELLOW	SLOW DOWN, PROCEED WITH CAUTION
	RED	EVENT CANCELLED, WALK TO GORTON WITH CAUTION

Race results will be posted at Gorton and found online at www.ItsRaceTime.com/Results