



# Temporary Use Permit Application

City of Park Ridge

Community Preservation and Development Department . 505 Butler Place . Park Ridge, IL . 60068

Phone: (847) 318-5291 . Fax: (847) 318-6411 . www.parkridge.us

Today's date: \_\_\_\_\_

\_\_\_\_ Specified (Zoning Administrator Approval)

\_\_\_\_ Non-specified (City Council Approval)

## **Applicant Information**

Name of event \_\_\_\_\_

Applicant name: \_\_\_\_\_

Applicant address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship of applicant to event: \_\_\_\_\_

Has applicant ever been convicted of a felony? \_\_\_\_\_

## **Group Information**

Group coordinating event \_\_\_\_\_ Phone \_\_\_\_\_

Secondary contact for event \_\_\_\_\_ Phone \_\_\_\_\_

## **Event Information**

Proposed date(s) and time(s) of event \_\_\_\_\_

Address or location of event \_\_\_\_\_

Nature, purpose and detailed description of event \_\_\_\_\_

\_\_\_\_\_

Will the event be open to the public? \_\_\_\_\_ If so, please describe \_\_\_\_\_

\_\_\_\_\_

Estimated number of people attending event \_\_\_\_\_

Will any part of the event take place on public property? \_\_\_\_\_ If so, where? \_\_\_\_\_

\_\_\_\_\_

Where do you anticipate attendees will park? \_\_\_\_\_

Please answer all of the following questions by circling yes or no for each question:

- |   |     |    |
|---|-----|----|
| 1. Will food be sold or served at the event?  | Yes | No |
| 2. Will food be prepared at the event?  | Yes | No |
| 3. Will liquor be sold or served at the event?  | Yes | No |
| 4. Will any streets need to be closed for the event?  | Yes | No |
| 5. Will police or security services be needed at the event?   | Yes | No |
| 6. Will fire or paramedic services be needed at the event?  | Yes | No |
| 7. Will sanitary facilities be needed at the event?   | Yes | No |
| 8. Will tents <u>greater</u> than 400 square feet be used at the event?   | Yes | No |
| 9. Will there be any amusement rides at the event?  | Yes | No |
| 10. Will there be any live animals at the event?  | Yes | No |
| 11. Will electrical service be required for the event?  | Yes | No |
| 12. Will there be live entertainment at the event?  | Yes | No |
| 13. Will items be sold at the event?  | Yes | No |
| 14. Will a fee be charged to attend the event?  | Yes | No |
| 15. Will any public works services be needed at the event?<br>(This includes barricades, garbage and recycling, etc.) | Yes | No |

16. What is the setup and cleanup timeframe needed? \_\_\_\_\_

17. Will there be event signage? \_\_\_\_\_ Yes \_\_\_\_\_ No \_\_\_\_\_  
Specify location, number and size of signs \_\_\_\_\_

If you answered yes to any of the above questions, please describe below. It is also very likely that you will need an additional permit and/or a health inspection. (Attach additional pages if necessary.) If a vendor is being used for the event, please provide the vendor's contact information,

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

For office use only  
Permit Approved and issued by: \_\_\_\_\_ on \_\_\_\_\_