

CITY OF LOCKPORT

OUTDOOR SPECIAL EVENT PERMIT APPLICATION

\$25.00 Non-Refundable Processing Fee
(No fee for a Block Party)



Office of the City Clerk
222 E. 9th Street/3rd Floor
Lockport, Illinois 60441
Office: 815-838-0549 Fax: 815-838-9498
Website: www.cityoflockport.net

This application pertains to a one time or infrequently occurring event that takes place outside normal operations, programs or activities of the private sponsoring/organizing individual, group or business. An Outdoor Special Event Permit may be permitted in any Zoning District upon application to the City Clerk's Office for review and approval. (Per Chapter 95 of the Lockport Code of Ordinances)

A permit is required for any of the following outdoor activities, including but not limited to:

- a) Any organized athletic, fundraising, or public awareness types of events, including those that may use any public streets or sidewalks as their route;
- b) Special business promotions, excluding temporary outdoor sales.
- c) Carnivals, parades, petting zoos, and fireworks displays;
- d) Church socials, festivals, and weddings* (*except for those held at the Lincoln Landing/governed by the Lincoln Landing Site Council); and
- e) *Block parties or gatherings.

***BLOCK PARTY:** For Block Party's the City will reimburse up to \$500.00 for bouncy houses, face painting, disc jockeys, magicians, etc. There will be no reimbursement for food or alcohol. Please provide the City Clerk's Office with an estimate of the costs before the event to get a "pre-approval". If pre-approved, please submit your receipts along with a W-9 form after your event, to the City Clerk's Office for reimbursement.

**\$25.00 Non-Refundable processing fee
(No fee for a Block Party)**

**APPLICATION FOR AN OUTDOOR SPECIAL EVENTS PERMIT
OFFICE OF THE CITY CLERK
LOCKPORT, ILLINOIS 60441**

PLEASE COMPLETE THE ENTIRE FORM AND PRINT LEGIBLY. Incomplete forms will be returned. Complete application packets must be submitted no less than thirty (30) days prior to the event. Please submit application to the City Clerk's Office, 3rd Floor.

CONTACT INFORMATION

Contact Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Email Address: _____

Cell Phone Number: _____

Organization or Business Name: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____ Email Address: _____

SPECIFIC REQUEST INFORMATION

Description/Type of Event: _____

Location of Event: _____

Event Date: _____ Rain Date: _____

Starting and Ending Time: _____

If Applicable: Name of Street to be Closed Off (specify hundred block and cross streets):

If Applicable: What is the route of your parade, running event, etc. _____

Estimated Number of People Attending: _____

If having a Block Party, estimated number of children attending: _____

Date of Last Event at Same Location: _____

Type of Outdoor Music: Yes No Type: Radio Stereo DJ Band

Location of Sound Amplification on the Property: _____

Is the Property within 300 feet of the Property Line of any residence/s, hospital, church, or school?

Yes No (If yes, then identify: Residence's Hospital Church School)

Use of Alcohol: Yes No Type: BYOB Keg other, describe:

(Sales and underage drinking is prohibited)

ATTENTION: If you are a Not-for-Profit organization and will be selling alcoholic beverages at the event, a State of Illinois Special Event Retailer's Liquor License (Not-for-Profit) must be applied for. This license shall permit the licensee to purchase alcoholic liquors from an Illinois licensed distributor (unless the licensee purchases less than \$500 of alcoholic liquors for the special event, in which case the licensee may purchase the alcoholic liquors from a licensed retailer), and shall allow the licensee to sell and offer for sale, at retail, alcoholic liquors for use or consumption, but not for resale in any form, and only at the location and on the specific date(s) designated for the special event on the license. The Special Event Retailer's Liquor License (Not-for-Profit) application form is attached, and is to be used only for events conducted by an educational, fraternal, political, civic, religious, or not-for-profit organization. State license fee is \$25.00. In addition, the NFP organization needs to get a City NFP Special Event Liquor License that the Mayor signs off on and approves. The City fee is \$31.25 per day. (Per Chapter 111 of the City Code and the State of Illinois Liquor Control Act). Please return your completed Special Event Retailer's Liquor License (Not-for-Profit) application, and this completed Outdoor Special Event application to the City Clerk's Office.

*If you are an Illinois licensed liquor retailer and will be selling alcohol and transferring a portion of your alcoholic liquor inventory from its licensed retail premises to a designated site for a special event, you must apply for a State of Illinois Special Use Permit Liquor License. The Special Use Permit application form is attached. In addition, the Illinois licensed liquor retailer needs to get a City Special Event Liquor License that the Mayor signs off on and approves. The City fee is \$31.25 per day. (Per Chapter 111 of the City Code and the State of Illinois Liquor Control Act). Please return your completed Special Use Permit Liquor License application, and this completed Outdoor Special Event application to the Clerk's Office.

Use of a Canopy, Tent, or Other Temporary Structure: ___Yes ___No (Building Permit may be required; no stakes are to be driven into any public street or public sidewalk). The Building Department can be reached at (815) 838-0549 press 5.

Use of a Stage: ___Yes ___No (Building Permit may be required)

Use of Food Vendors or Caterers: ___Yes ___No / Name of Business: _____
(Food Dispensing Vehicles, Carts, Pop-Up tents, or otherwise need to apply for a license with the City Clerk's Office – per Chapter 110 of the City Code). If you have more than one Food Vendor, please use an extra sheet of paper and attach to application.

Telephone Number: _____

Use of Inflatable Children's Toys (Jumpies): ___Yes ___No (Must be located on private property).

Use of portable restroom facilities (port-a-johns): ___Yes ___No (Must be located on private property and the number shall be determined by the Building Official). The Building Department can be contacted at (815) 838-0549 press 5.

Note: If there is an active Homeowner's Association (HOA), an approval from a HOA Board Member of the Special Event will be required: ___Yes ___No (If yes, please provide approval letter from HOA Board Member)

Applicant's Statement of Agreement:

Everything that I have stated on this application is correct to the best of my knowledge. I have read, understand, and agree to abide by the rules and regulations included in this application. The permit, if granted is not transferrable and is revocable at any time at the absolute discretion of the City of Lockport. I hereby affirm the above information is true and correct in describing the intent of this application. I understand that the issuance of the special event permit is contingent upon compliance with all conditions and requirements. I further affirm that if a permit is granted, that it will not be used or represented in any way or form as an endorsement of or by the City of Lockport or any department or officer thereof.

I, _____ the undersigned agree to abide by the provisions in this Application.

LOCATION OF EVENT: _____ DATE OF EVENT: _____

(Print Name of Applicant)

(Signature of Applicant)

Name of Organization

Date: _____

For Office Use Only:

Received and Recorded in the City Clerk's Office on _____

Mailed to applicant on _____

Donna Tadey
Administrative/Deputy Clerk

Approval _____ **Chief of Police**

List any conditions: _____

Reason for Denial: _____

Approval _____ **Director of Public Works**

List any conditions: _____

Reason for Denial: _____

Approval _____ **City Planner**

List any Conditions: _____

Reason for Denial: _____

Approval _____ **Building Official**

List any Conditions: _____

Reason for denial: _____

Approval _____ **Fire District**

List any conditions: _____

Reason for Denial: _____

Approval _____ **City Administrator**

List any conditions: _____

Reason for Denial: _____