



SPECIAL EVENT APPLICATION

Thank you for your interest in holding a Special Event in the City of Joliet. The City of Joliet recognizes that a variety of events held within the City are instrumental in creating a comfortable, and welcoming atmosphere. The unique contributions that special events add to the spirit and vitality of our growing community are an essential part of the City. Events celebrate organizations, further economic growth, blend cultures, create fundraising opportunities for non-profit organizations and increase tourism and recreation. The City of Joliet is proud to host a variety of these events each year, from major festivals, parades and sporting events to local neighborhood gatherings.

This packet contains the information needed to apply for a Special Event Permit, as well as most other required permits related to your event. **Please note: Filming / Media Production and Neighborhood Block Party are separate applications.**

On page 12 of this packet, you will find an event checklist, which is designed to help you determine which additional permits, if any, are required for your special event. Some of the information may not apply to your special event. The Special Event Permit application must be completed, in full and submitted with all of the requested documentation. **All special events must have final approval by the City of Joliet.**

SPECIAL EVENT DEFINITION

A “Special Event” is an outdoor event held on public or private property including, but not limited to, parades, festivals, athletic events, concerts, or other public meeting or an event deemed to significantly impact the city, which meet some or all of the following criteria:

- Closure of streets/roads (with the exception of block parties)
- Issuance of multiple permits or licenses
- Use of amplified sound / outdoor entertainment
- Use of City-owned property
- Use of City services
- Use of a Food Truck/Mobile Unit

In all respects, events shall not significantly or materially be detrimental to the health, safety, and welfare of the public or injurious to other property or improvements in the surrounding area. Factors to be considered in issuing a Special Event Permit include, but are not limited to, excess traffic, parking, noise, pedestrian safety, and adverse effects on neighboring areas.

If your special event meets the above criteria, the event is required to obtain a Special Event Permit.

Applications must be submitted to the Special Events Coordinator, a minimum of 45 days prior to the event.

A \$25.00 late fee will be applied to ANY application received within 45 days of the event.

Name of Event:	Date of Event:
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Return Applications to: City of Joliet, City Clerk-Special Events, 150 West Jefferson Street, Joliet, IL 60432
cojspecialevents@jolietcity.org



SPECIAL EVENT APPLICATION

Requirements and Conditions

1. **Alcoholic Beverages:** A temporary liquor license is required for the sale of alcoholic beverages. All temporary liquor licenses must be approved by the City of Joliet Liquor Commission. Please contact the Mayor's Office at 815/724-3700 with questions regarding liquor licenses.
2. **Block Parties:** The Special Event Application is not necessary for block parties; However the City of Joliet does require that a permit be obtained for this type of gathering. For a block party permit application, please visit www.cityofjoliet.info or contact the City Clerk's Office — Business Services at: 815-724-3905.
3. **Certificate of Insurance:** A Certificate of Insurance naming the City of Joliet and their respective public officials, officers, employees, volunteers, agents and assigns, as an additional insured is required. The insurance policy shall indemnify the applicant and the City against liability for personal injury, death or damage in the amount of \$1,000,000.
4. **Compliance with City Ordinances:** The applicant shall comply with all applicable City ordinances, codes, requirements and conditions.
5. **Compensation for City Staffing:** All City personnel involved during the day(s) of the event AND in the preparation of the event will be charged back to the sponsoring agency. The bill will be transmitted to the sponsoring agency within sixty (60) working days after the completion of the event.
6. **Food and Beverage Health Inspections:** Food and beverages shall not be sold at an event, unless approved and licensed, if necessary, by the County Health Department. Event organizers are **required** to have and are responsible for arranging health inspections for their events. Please call 815/727-8480 (Will County) or 630/553-9100 (Kendall County) for more information.
7. **Hold Harmless Agreement:** The event organizer must sign a Hold Harmless Agreement, agreeing to indemnify the City of Joliet against any and all actions arising from, during or as a result of the event.
8. **Site Inspection:** A site inspection is required for all events having any of the following: tents, stages, food service, liquor service or amusements. A separate permit is also required for any tents or stages. Request for site inspections must be made 7 days prior to the event. Contact the City of Joliet, Building Department at 815/724-4070 to schedule the site inspection. **Inspections are done between 8:00 a.m. and 3:30 p.m. Monday through Friday. Inspections will not be done on weekends or holidays. Please be sure to plan & set-up accordingly.**

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

Application Process

- Application Deadline:** Special Event Permit applications are due to the City of Joliet’s Special Event Coordinator, at a minimum of **45 days** prior to your event. This allows city staff sufficient time to evaluate your request and provide a recommendation to City Council for consideration, if necessary. You will be notified by the Special Events Coordinator once your permit is complete. At that time, you may pick up your permit from the City of Joliet Municipal Building or arrange to have it sent via email or mail. If a site inspection is required and all other documentation and approvals have been received, the inspector may, if available, provide the permit after a successful inspection.
- Submission:** Please return the Special Event permit application, any additional permit applications and ALL required supporting documentation to:

City of Joliet
City Clerk’s Office
Attn: Jessica Marsett, Special Events Coordinator
150 W. Jefferson St.
Joliet, IL 60432
Ph. 815/724-3780
Fax 815/724-3785
cojspecialevents@jolietcity.org

3. Permit Fees:

- Special Event Permit: \$100.00
- Special Event Permit (Not-for-Profit): \$50.00 (must submit proof of NFP Status)
- Temporary Liquor License \$50.00
- Tent Permit \$50.00 per tent
- Stage Permit \$100.00 per stage
- Raffle Permit \$10.00
- **Late Fee \$25.00 (if application is received within 45 days of event)**

Other fees are determined based on the information listed on the application. Fees for City staff will be invoiced after the completion of the event.

- Payment:** Payment of the Special Event Permit fee is required at the time of application. Please make checks payable to City of Joliet and note the name of the event on the check. Fees are non-refundable and payment of fees does not guarantee the approval of the permit.

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

PLEASE COMPLETE THE ENTIRE APPLICATION AND TYPE OR PRINT LEGIBLY. Incomplete applications will NOT be processed.

Name of Event: _____

Type of Event (please check all that apply):

- | | |
|---|--|
| <input type="checkbox"/> Athletic/Recreation (5K, 10K, walk-a-thon) | <input type="checkbox"/> Carnival/Circus |
| <input type="checkbox"/> Car Show | <input type="checkbox"/> Concert/Performance |
| <input type="checkbox"/> Farmer's Market/Outdoor Market | <input type="checkbox"/> Fireworks |
| <input type="checkbox"/> Parade | <input type="checkbox"/> Street Festival |
| <input type="checkbox"/> Meeting | <input type="checkbox"/> Food Truck(s) |
| <input type="checkbox"/> Other (please explain): _____ | |

Name of Organization holding Event: _____

Location of Event: _____

Does the Organization own the Property on which the event is located? YES NO

If no, a letter from the property owner, giving permission for use of the property is required.

Is the event being held on City-Owned Property? YES NO

Date(s) of Event: _____ Hours of Event: _____

Set-up Date: _____ Set-up Hours: _____

Dismantle Date: _____ Dismantle Hours: _____

Anticipated # of:

Participants: _____ Spectators: _____ Staff/Volunteers: _____

Is this an annual (recurring) event? YES NO

If yes, please state any problems and /or incidents that have occurred in past years and what, if anything has been done to resolve the issue for this year: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

SPONSORING ORGANIZATION INFORMATION

Name of Sponsoring Organization: _____

Is this Organization a bona fide not-for-profit? YES NO

If yes, attach proof of not-for-profit status to this application

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Website: _____

Contact Person: _____

Primary Phone: _____ Cell Phone: _____

Email Address: _____

On-Site Event Coordinator: _____

Please check here if same as contact person

Primary Phone: _____ Cell Phone: _____

Email Address: _____

Additional Coordinator: _____

Primary Phone: _____ Cell Phone: _____

Email Address: _____

Additional Coordinator: _____

Primary Phone: _____ Cell Phone: _____

Email Address: _____

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

OPERATIONAL INFORMATION

The City of Joliet does not provide portable restrooms or garbage service for Special Events.

RESTROOM FACILITIES:

Name of Company Providing Facilities: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

of Total Restrooms: _____ # Accessible: _____ # of Hand Washing Stations: _____

Date Installed: _____ Date Removed: _____

WASTE FACILITIES:

Name of Company Providing Facilities: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Number of Garbage Receptacles Provided: _____

Dumpster: YES NO

Date Installed: _____ Date Removed: _____

If you are using a dumpster, you must indicate the location of the dumpster on the event map.

Please Note: If you are holding your event Downtown in Van Buren Plaza, there are trash containers located in several areas. These are NOT to be the ONLY trash containers for your event, as they will not be emptied during the event. You are required to provide other means for garbage collection. However, the event organizer is expected to maintain these containers during the event (clear trash off the top/surrounding) so they are not an eyesore and overflowing.

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

OPERATIONAL INFORMATION CONTINUED

FOOD

Is food being provided or sold at the event? YES NO

of Food Vendors: _____

*Please provide the following information **FOR EACH VENDOR** (use additional sheets if necessary):*

Name of Vendor/Restaurant/Food Truck: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Type of Food Service: Mobile Unit/Food Truck Table/Tent set-up

Food Truck Vehicle Information:

Vehicle No: _____ Primary User's Name: _____

Year: _____ Make: _____

Model: _____ Plate Number: _____

Color: _____ VIN: _____

Name of Vendor/Restaurant/Food Truck: _____

Address: _____

City: _____ State: _____ Zip: _____

Contact Name: _____ Phone: _____

Type of Food Service: Mobile Unit/Food Truck Table/Tent set-up

Food Truck Vehicle Information:

Vehicle No: _____ Primary User's Name: _____

Year: _____ Make: _____

Model: _____ Plate Number: _____

Color: _____ VIN: _____

A permit is required from the Health Department **for each food vendor**. It is the responsibility of the event coordinator to ensure each vendor is licensed to serve food and permitted by the Health Department for the event and date listed on this application.

Name of Event:

Date of Event:



SPECIAL EVENT APPLICATION

SOUND AMPLIFICATION

Starting and Ending time of amplification: _____

Type of outdoor amplification:

- PA System
 DJ
 Live Band
 Other (please describe)

Location of outdoor amplification _____

Is the property within 300 feet of the property line of any Hospital, Church, School or Courthouse?

- Yes
 No

If yes, name and address of institution:

Name of musical group(s) or DJ performing: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Contact name: _____ Phone: _____

Please initial

- The person listed on the application as having authority to control noise for the event must remain at this event until its completion and shall be available to accept any complaints
- The sound amplification permission is limited to the date and time specified on the application but in no event shall begin before 7:00 a.m. or continue after 11:00 p.m.
- The volume of sound shall be so controlled that it will not be unreasonably loud, raucous, jarring, disturbing or a nuisance to reasonable persons of normal sensitiveness within the area of audibility
- Upon request by a police officer, the sound level of the live music or amplified sound shall be lowered or shut off. Failure to do so may result in the issuance of a compliance ticket

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

SECURITY PLAN

Security Contact Person: _____

Phone: _____ Email: _____

Will you be hiring off-duty Joliet Police Officers for security? YES NO

If yes, be advised that you will be charged for police services which will be billed within 60 days after the event. You must contact the Joliet Police Operations Division at: (815)724-3060 to coordinate the police services needed at least 30 days in advance of your event.

If no, complete the following information:

Name of Private Security Company: _____

Address: _____ City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Number of Security Personnel per Shift: _____ # Expected Attendance: _____

MEDICAL PLAN

Medical Contact Person: _____

Phone: _____ Email: _____

Will Emergency Medical Services be summoned through 911 only? YES NO

If no, complete the information below if required:

Will you be hiring Joliet Fire Department for EMS Services? YES NO

If yes, be advised that you will be charged for EMS services which will be billed within 60 days after the event. You must contact the Joliet Fire Department at: (815)724-3565 to coordinate the EMS services needed at least 30 days in advance of your event.

If no, complete the following information:

Name of Licensed EMS Provider: _____

Address: _____ City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Number of EMS Personnel per Shift: _____ # Expected Attendance: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

GENERAL EVENT INFORMATION

SITE PLAN / ROUTE MAP

Please use the space below or attach a separate page to illustrate the layout / route for your event.

Site Map with **(please use codes indicated)**

- | | |
|--|---|
| 1. Location of First Aid (+) | 6. Location of Sound Stages (SS) |
| 2. Location of Food Vendors (FV) | 7. Location of Tents (T) and Canopies (C) |
| 3. Location of Alcoholic Beverage Vendors (AB) | 8. Location of Washroom Facilities (WF) |
| 4. Location of Non-Alcoholic Beverage Vendors (NAB) | 9. Fireworks Truck placarded |
| 5. Location of Garbage (G) / Recycling (R) Receptacles | 10. Public Entrances and Exits |

If the event is a 5K/10K run or other type of event with a route, please indicate the planned route with a dashed line

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

TERMS AND CONDITIONS / HOLD HARMLESS

PLEASE INITIAL

- I agree that the information in this application is true and correct to the best of my knowledge.
- I understand the City of Joliet may close my event should we violate City Ordinances, or deviate from the defined, permitted activity.
- I agree to promptly reimburse the City for costs associated with City services.
- I agree to inform the City of any changes to this application.
- I acknowledge that the Event does not owe any monies to the City
- I agree to the requirements and conditions listed on page 2 of this application.

Signature of Organizer _____ Date _____

RELEASE AND HOLD HARMLESS AGREEMENT

_____ (Permit Holder) recognizes and acknowledges that there are certain risks associated with a special event within the City of Joliet. By signing this application for a special event, Permittee does hereby agree to assume the full and complete risk of any injuries, damage, or loss regardless of the type or severity, which anyone employed by or used as a volunteer by Permittee may sustain as a result of the special event in the City of Joliet.

Permit Holder does hereby fully release and discharge the City of Joliet, its officers, agents and employees from any and all claims for injury, damage, or loss sustained by any of its employees or volunteers connected in any way to this special event in the City of Joliet.

Permit Holder further agrees to indemnify and hold harmless and defend the City of Joliet, its officers, agents and employees from any and all claims, including attorney's fees, resulting from injury, damage or loss sustained by any of its employees or volunteers, or caused by them, and arising out of, or in any way connected or associated with, this special event in the City of Joliet.

I, _____ (representative name) state that I am an authorized representative of the Permit Holder with the authority to execute this agreement. I have read and fully understand the above release and hold harmless agreement, and execute it on behalf of, and as the duly authorized representative of the Permit Holder.

Signature of Representative

SUSCRIBED and SWORN to before me this

Date

_____ day of _____, 20____

Notary Public (stamp seal adjacent)

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

ADDITIONAL PERMIT / INFORMATION QUESTIONNAIRE

Please answer the following questions to determine what additional paperwork / approvals are needed:

Are you serving alcoholic beverages at the Event? Yes No
If yes, complete and attach Temporary Liquor License Application (pg. 13)

Are you erecting a tent over 20 square feet, stage, air-supported structure, or bleachers? Yes No
If yes, complete and attach Temporary Tent / Stage / Air Supported Structure / Bleacher Application (pg. 14)

Are 5,000+ in attendance expected? Yes No
If yes, complete and attach a Traffic Control Application (pg. 16)

Are street closures required? Yes No
If yes, complete and attach a Traffic Control Application and a Street Closure Application (pg. 16)

Does your event include a Carnival or Circus? Yes No
If yes, complete and attach the Carnival/Circus Application (pg. 17)

Are you serving food at the Event? Yes No
If yes, contact the Health Department for permit requirements.
Will County: (815)727-8480 Kendall County: (630)553-9100

Does your event include fireworks? Yes No
If yes, contact the Joliet Fire Department at: (815)724-3500

Are you having a raffle at the event? Yes No
If yes, complete and submit a Charitable Raffle License Application

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

TEMPORARY LIQUOR LICENSE APPLICATION

Liquor License Fee: \$50.00

Starting and Ending time of Liquor Service: _____

Type of Liquor being Served:

Beer Wine Spirits Other (please describe)

Location of Liquor Service (address of event): _____

Applicant Name: _____

Business/Organization: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Applicant Phone: _____ Email: _____

Business/Organization is a: Non-Profit Business Other (please describe)

THE FOLLOWING ITEMS MUST ACCOMPANY APPLICATION FOR LIQUOR LICENSE:

List up to Three (3) People Responsible for Serving Alcoholic Beverages During the Event		
Name:	Phone:	Age:
Name:	Phone:	Age:
Name:	Phone:	Age:

1. A Certificate of Insurance showing coverage for commercial, general, or liability insurance and dram shop (liquor liability) insurance naming the City of Joliet as additional insured and listing the City of Joliet, 150 West Jefferson Street, Joliet, IL as a certificate holder.
2. Site Map (include area where alcohol will be sold and consumed, fences and barricades).
3. Security Plan (include a description of security measures, procedures for carding minors and preventing over-consumption of alcohol).
4. Proof of not-for-profit status (articles of incorporation, tax exempt number).

Name of Event:	Date of Event:
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Return Applications to: City of Joliet, City Clerk-Special Events, 150 West Jefferson Street, Joliet, IL 60432
cojspecialevents@jolietycity.org



SPECIAL EVENT APPLICATION

TEMPORARY TENT / STAGE / AIR-SUPPORTED STRUCTURE / BLEACHERS PERMIT APPLICATION

Tent Permit: \$50.00 per tent Stage Permit: \$100.00 per stage

Inspections are done between 8:00 a.m. and 3:30 p.m. Monday through Friday. Inspections will not be done on weekends or holidays. Please be sure to plan & set-up accordingly.

Installation Company Name: _____

Street address: _____

City: _____ State: _____ Zip code: _____

Phone: _____ Email: _____

Type and Quantity of Temporary Structure(s):

Tent # _____ Stage # _____ Air-Supported Structure # _____ Bleachers # _____

Stages will also require a general building permit application

Location of Structure(s) (address of event): _____

(Indicate location of all structures, parking, all existing facilities and features on required site map)

Size/Dimensions of Structure(s): _____

Dates of Temporary Structure(s) (not to exceed 30 days):

Installed: _____ In Use: _____ Dismantled: _____

Certificate of Proof for Fire Resistance: YES (attach certificate) NO

(Article 18, Section F-1801.3 BOCA Basic Fire Prevention Code)

Issued by: _____ Issue Date: _____

Signature of Installer: _____

Signature of Property Owner: _____ Ph. _____

Structural drawings & calculations must accompany any stage permit application

Office Use Only: Per Occupant: 7 sq. ft./chairs; 3 sq. ft./standing

Occupant Load Limit/sq.ft. _____ # of Exits: _____

Permit Approved by: _____ Date: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

TEMPORARY POWER REQUIREMENTS

If you are planning on using any type of electricity, the following requirements must be complied with:

1. Identify all power sources and disconnects
2. All junction boxes, panels, and disconnects shall be weatherproof
3. GFCI protection is required for 120V circuits including lighting
4. Extension cords shall be heavy duty type, outdoor rated, 14 gauge or larger, and have 3 prongs on each end by the manufacturer. (repaired extension cords are not acceptable)
5. All connections shall be made above grade and extension cords shall be protected from accidental damage
6. Power strips shall be heavy duty, and outdoor rated @ 15 amps
7. Stages shall be grounded to the source where the power supply originates
8. Emergency and exit lighting is required for all enclosed tents and temporary structures

I understand that I am responsible for ensuring these requirements are met.

Signature of Organizer _____ Date _____

If you have any questions or concerns regarding the above requirements, please contact the City of Joliet Building Department at: 815-724-4070.

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

STREET CLOSURES

Please indicate below (use additional pages if necessary) what street closures are being requested.

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

Street Name: _____ between _____ and _____

Date: _____ Time: Starting _____ Ending _____

THE FOLLOWING ITEMS MUST ACCOMPANY THE STREET CLOSURE REQUEST:

1. Site Map (location of barricades, closed streets/public right-of way and/or the parade/run/bike route, if applicable, must be *CLEARLY MARKED*).

TRAFFIC CONTROL PLAN (Street Closure and/or 5,000+ attendance)

Traffic Contact Person: _____

Phone: _____ Email: _____

Please explain the proposed traffic control for this event: _____

Expected attendance _____

Will you be hiring Joliet Police Officers for traffic control? YES NO

Please complete the following:

Date(s) Officers Needed: _____

Time of Traffic Control: Start: _____ End: _____

Location of Traffic Control: _____

THE FOLLOWING ITEMS MUST ACCOMPANY THE TRAFFIC CONTROL PLAN:

1. Site Map (Movement of traffic to and from event must be *CLEARLY MARKED*).

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

CARNIVAL/CIRCUS

Type of Event: Carnival Circus

Description of Event: _____

Corporate Business Information

Business Name (DBA): _____
Corporate Name: _____
Corporate Address: _____
City: _____ State: _____ Zip Code: _____
Business Phone: _____ Email: _____
Contact Name: _____ Phone: _____
FEIN: _____ IBT Number: _____

Business Ownership Information

Provide the following information concerning business ownership:

Legal Business Name: _____

- Individual Partnership Corporation
- Limited Liability Corporation (LLC) Private Limited Company (LTD)

Name: _____ Title: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Ownership %: _____

Name: _____ Title: _____

Home Address: _____ City: _____ State: _____ Zip Code: _____

Phone: _____ Ownership %: _____

Name of Event:	Date of Event:
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SPECIAL EVENT APPLICATION

CHECKLIST OF COMPLETED APPLICATION

Before you submit your application to the City of Joliet,
Please make sure that the following steps have been completed.

- Remove pages 1-3 for your reference
- Complete, sign and date Application (General Event Information pages 4-10)
- Attach insurance coverage information
- Attach Site Map/Route Map indicating layout of event/route and other required information as listed on page 10.

Include payment

If necessary,

- Attach the Temporary Liquor License Permit Application and all required documents listed on page 13.
- Attach the Temporary Tent / Stage / Air Supported Structure Application and all required documents listed on page 14.
- Attach the Traffic Control Plan, page 16
- Attach the Street Closure Plan, page 16
- Attached the Carnival/Circus application, page 17

Would you like your event to be advertised on the City's website? YES NO
If yes, please include a flyer or other promotional information with this application.

Signature of Organizer _____ Date _____

Name of Event:	Date of Event:
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