



Special Event Permit

Application

Submit this application, along with all necessary documentation and administrative fee if applicable, to the City of Urbana Public Works Department, c/o Special Events, 706 S. Glover Ave., Urbana, IL 61802.

Event Information

Name of Event: _____

Location(s): _____

Type of Event:

- Run/Walk/Bike
 - Festival/Fair
 - Parade
 - Commercial Property Event
 - Free Speech Event
 - Other _____
- Estimated # of Participants: _____
- Estimated Attendance: _____

Date(s): _____ Time(s): Start: _____ am/pm Finish: _____ am/pm

Is the Event a Fundraiser? If yes, please list the Beneficiary: _____

Registration/Entrance Fee: _____

Yes No Has this event been held before?

Organization Information

Organization: _____

Contact Person: _____

Address: _____

Phone: _____ Fax: _____ Email: _____

- This organization is registered with the State of Illinois as a non-profit organization.

If box is checked, please attach a copy of the tax-exempt ID number and certificate.

On Site Person In Charge On Day Of Event

Name: _____

Address: _____

Phone: _____ Cell: _____ Email: _____

Relation to the above organization: _____

Please provide a description of your event. What activities are planned? Be as specific as possible._____

Yes No Will the event be Handicap accessible? If no, please explain: _____

General Service Questions

Section A: PUBLIC WORKS DEPARTMENT: Event Set-up/Traffic Control/Electrical Services/
Parking/Waste and Recycling/ Event Clean-up

Yes No Will the public right-of-way be used for this event?

Yes No Are street closures requested?

If yes, please list what streets: _____

Reason for street closure: _____

Does your event require any other parking related requests or considerations? _____

If parking meters are on these streets you must contact the City's Finance Department at (217) 384-2345.

Yes No Will amplified music be used as part of this event?

If yes, please describe type of amplified music (live band, DJ, etc.) and list hours of operation:

Please provide location of stage on required site plan/map.

What is your plan for cleaning, recycling and disposing of all refuse from this event? _____

Please indicate if any of the following services need to be provided for your event:

- Electrical
- Cones/Barricades
- Signs/Banner Placement

Section B: COMMUNITY DEVELOPMENT SERVICES DEPARTMENT: Tents/Temporary Structures

Yes No Will you be utilizing a tent for your event?

- If your tent is 400 square feet or more in size, please contact the Community Development Building Safety Department at (217) 384-2443. *Please attach a copy of permit.*
- If your tent is 400 square feet or under in size, please contact Public Works at (217) 384-2318.

Yes No Will you be utilizing any additional temporary structures?

If yes, please list structures. Be as specific as possible. _____

Section C: POLICE DEPARTMENT:

Yes No Is traffic control or crowd control necessary for your event?

If yes, please describe your needs: _____

Yes No Will private security be used at your event?

If yes, please provide the following contact information:

Company Name: _____

Contact Person: _____

Phone: _____ Fax: _____ Email: _____

Section D: FIRE DEPARTMENT:

You must provide access to all sites in the case of emergencies.

Section E: MAYOR'S OFFICE:

Yes No Will alcoholic beverages be served or sold?

- If yes, please contact the Urbana City Mayor's Office on the second floor of the City Building at 400 S. Vine Street to complete a separate temporary liquor license application. *Please attach a copy of that permit.*

Please note: Whenever food is offered to the public during fairs, fund raisers or special events less than 14 consecutive days in length, a temporary food permit issued by the Champaign-Urbana Public Health District is required. *Please attach permit.*

Please note applications for temporary permits and applicable fees must be submitted to the Health District a minimum of two weeks prior to the temporary event. Call (217) 373-7900 for more information.

Section F: URBANA BUSINESS ASSOCIATION:

Yes No Is the Urbana Business Association (UBA) sponsoring your event?

If yes, please describe how the UBA is contributing to the event : _____

Section G: UNIVERSITY OF ILLINOIS AT URBANA-CHAMPAIGN:

Yes No Is your event taking place on campus?

INDEMNIFICATION AND HOLD HARMLESS AGREEMENT

Applicant agrees to defend the City from and against any and all claims, suits, or actions for death or injury to persons or damage to property brought against the City arising from any alleged claims, acts or omissions in connection with this Special Event Permit, whether or not suit is filed, unless such claim, suit or cause of action was based solely on the negligence of the City, its employees, agents or contractors. Additionally, applicant shall indemnify the City for any sums the City becomes obligated to pay as damages arising out of such circumstances, except to the extent such damages are due solely to the negligence of the City, its employees, agents or contractors. Additionally, the applicant agrees to reimburse the City for any and all costs and expenses incurred by the City as a result of the Special Event. The applicant is an authorized representative/ agent for the organization sponsoring the Special Event.

Name of Event: _____

Organization: _____

Contact Person (printed name): _____

Title: _____

Signature: _____

Electronic Signature Agreement. By checking this box, you are signing this Agreement electronically and you agree that your electronic signature is the legal equivalent of your manual signature on this Special Event Permit Application.

Date: _____

By checking this box, you are indicating that you have read and understand all City of Urbana policies pertaining to Special Events and that noncompliance with any city ordinance or state or federal law may result in revocation of the permit.