#### SPECIAL EVENTS



630-293-2200

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475 Main St, West Chicago, IL 60185



## BLOCK PARTY PERMIT APPLICATION

This application must be filled out for all resident and business block parties.

#### WHAT YOU SHOULD KNOW

- ▶ BLOCK PARTY. A congregation of citizens/neighbors held outdoors and on public property to conduct activities, including but not limited to children's games, picnics, food preparation and dispensing, and entertainment. It shall be for the benefit of all persons whose property abuts the section of street to be closed and not just for the private use of a specific property owner.
- ► All street closures that require police personnel must be paid by the event sponsor.
- ► The applicant is responsible for posting (1) Notification of Concealed Carry and (2)"No Firearms" signage in compliance with the State of Illinois Firearm Concealed Carry Act.
- Additional documents that you may need to submit with your application if applicable:
  - Layout of your event that includes fencing, port-o-lets, dumpsters, etc.
- All block parties are permitted until dusk. Applicants accept responsibility for the activities to be conducted throughout the term of this permit and agree to clear the area of any refuse or debris which may result from the activities.
- Barricades will be dropped off in the parkway at each end of the street to be closed on the day of the party. Applicants accept responsibility for placement and removal of the barricades and agree to protect them from damage and vandalism.
- If streets need to be closed, any resident/business in the area by the street closure must be given advance notice. All street closures for block parties must have the attached approval form signed by 2/3 of those impacted on the street.
- No individual admission charge is to be collected at the event for either entertainment, food, products or amusements.
- ► No alcohol is permitted to be consumed on City property.
- A completed application must be submitted no less than 30 days before your event and can be emailed to rarms@westchicago.org or sent to: City Hall, Attn: Block Party, 475 Main St, West Chicago, IL 60185.

Applications are reviewed by City staff and submission of an application does not guarantee approval.

#### PRIMARY CONTACT INFORM ATION—

This will be our City staff's contact person during the application process, and where all correspondence will be sent during this permit process.

APPLICANT'S FULL NAME		APPLICANT'	PLICANT'S PHONE NUMBER	
APPLICANT'S ADDRESS (STRE	APPLICANT'S EMAIL ADDRESS			
ARE YOU HOSTING A BLOCK  If so, please fill out the informa		BUSINESS?	Yes	No
BUSINESS NAME		BUSINESS ADDRESS (STREET, CITY, STATE, ZIF		
EVENT IN I		LOCATION OF EVENT		
DATE OF EVENT, TIME OF EVE	NT			
DO YOU PLAN ON CITY STREE  If so, please fill out the informa		Yes	No No	
NAME OF STREET	BEGINNING TIME	E	ENDING TIME	
NAME OF STREET	BEGINNING TIME	ENDING TIME		
NAME OF STREET	BEGINNING TIME	F	ENDING TIME	
LOCATION OF ASSEMBLY	AREA	 TIME OF ASSEME	BLY / TIME OF D	 ISBANDING

APPROXIMATE # OF PARTICIPANTS

#### \_\_\_\_\_ SOUND AMPLIFICATION ORDINANCE/GUIDELINES \_\_\_\_

	O YOU PLAN ON HAVING MUSIC/AMPLIFICATION AT YOUR EVENT?  so, check "yes" confirming you have read and will comply with the ordinance	Yes	No	
-	quirements below.			
— PE	ERFORMER/BAND AND MUSIC TYPE			
DE	ESCRIBE THE SOUND EQUIPMENT BEING USED			
•	If you plan on using amplification, please be advised that although there is no music, if complaints of any type are received, our Police Department persons City Code/Ordinance.			
•	It is unlawful to use, operate or employ any such amplifying equipment unless the City of West Chicago Noise Ordinanc Guidelines are followed.			
•	The operation of sound amplifying equipment shall only occur Sundays thro - 8:00 p.m., and Fridays and Saturdays 8:00 a.m11:00 p.m. Some events ma Police.			
•	Sound amplification devices noise limitation from residential properties: No any sound amplification device or system from any residential property with of fifty feet (50') or more from residential property during nighttime hours.			
	APPLICANT SIGNATURE			
ease	e sign below to confirm that you have included the non-refundable \$10 app	plication fee with this ap	plication and hav	
	read all rules and regulations. Please note that additional fees may	be incurred for City ser	vices.	
	APPLICANT SIGNATURE DA	ATE		
	APPLICANT NAME (PRINT)			

# STREET CLOSURE APPROVAL SIGNATURES -DATE OF STREET CLOSURE TIME **BLOCKS TO BE CLOSED OFF** Homeowner and/or business owner signatures are required for 2/3 (two thirds) of properties within blocked off streets. All addresses must be included. Tenants/property owner signatures are required if residing within the proposed street closure area. ADDRESS: APPROVAL SIGNATURE OF RESIDENT/BUSINESS OWNER:

### STREET CLOSURE APPROVAL SIGNATURES -(CONT.)

ADDRESS:	APPROVAL SIGNATURE OF RESIDENT/BUSINESS