

Special Events & Signage Applications:
Art Gallery & Trunk Show - Oct 24th
Historical Society Ghost Walk - Oct 30th

EVENT ORGANIZER SPECIAL EVENT APPLICATION CHECKLIST

*approved by LGBCP 8/18/15
to Trustees w/ DAVE L.*

Back Seat Gallery & Trunk Show
Long Grove Arts & Music Council / Long Grove Artists Guild
October 24, 2015 10:00am - 5:00pm

X	Event Application	
X	Date & Time	
X	Site Plan	Attached
X	Property Owner Permission	Attached
	COI & Waiver Certificates	Pending
X	Roads & Barricades	
X	Security & Sheriff	
	Signage	
X	Electrical	
	Vendors & Support Docs.	
N/A	Temp Liquor License App.	
N/A	App. To Conduct Raffle	
	Applicable Fees	

Application Received: 08/18/15

Reviewed by LGBCP Events Committee: _____ Approved Rejected

Pending: _____

Reviewed by LGBCP Board: 08 / 18 / 15 Approved Rejected

Pending: _____

Reviewed by Village Board of Trustees: _____ Approved Rejected

Pending: _____

**LONG GROVE B-1 HISTORIC BUSINESS DISTRICT
EVENT ORGANIZER SPECIAL EVENT APPLICATION**

NOTE: LGBCP Members, Vendors, Merchants or Sponsors, participating Organized Events, must complete a separate **Vendor Application**.

LGBCP

OTHER Long Grove Arts + Music Council
+ Long Grove Artists Guild

Applications should be sent to:
Long Grove Business and Community Partners (LGBCP)
308 Old McHenry Road
Long Grove, IL 60047
847-634-0888 Fax: 847-634-3673
info@visitlonggrove.com

OFFICE USE ONLY

- Event Application
- Site Plan
- Property Owner Permission
- COI & Waiver Certificates
- Roads & Barricades
- Security & Sheriff
- Signage
- Electrical
- Fire Inspection
- Vendors & Support Docs.
- Temp. Liquor License App.
- App. To Conduct Raffle
- Applicable Fees

FOR OFFICE USE ONLY

Received by LGBCP 08 / 18 / 15 Approved Rejected / /
by LGBCP Board of Directors

Submitted to Village Hall / / Approved Rejected / /
by Village Board of Trustees

This form must be completed in its entirety, and submitted, no more than 1 year in advance and no less than 150 days prior to the event, with all required attachments. Applicant will be notified by the LGBCP of the Village and LGBCP's approval or rejection within 45 days of submission.
Upon approval, applicant will be notified of fees and may accept or decline participation.

EVENT INFORMATION

Event Name: Back Seat Gallery + Trunk Show Location(s) in the B1 District: Along Towner Green
Description/Type of Event:
See Attached Description

Estimated Number of Attendees _____ Estimated Number of Vendors _____

Event Date / Dates & Time:
Day 1 - Date: Oct. 24 Hours: 10 AM to 5 PM

Day 2 - Date: _____ Hours: _____ to _____

Day 3 - Date: _____ Hours: _____ to _____

Set Up - Date Oct 24 Hours: 10 AM to 11 AM Dismantling - Date Oct 24 Hours 5 PM to _____

EVENT ORGANIZER: Georgia Cawley + Long Grove Artists Guild
Street Address: 4509 RFD City: Long Grove State: IL Zip: 60047
Phone Number: 847 404-8571 Fax Number: _____
Contact Person: Georgia Cawley Phone Number: 847 404-8571
E-mail Address: georgia@LGAMC.COM

Include with this application:

1. **SITE PLAN** of all areas of the B-1 District covered by the event. Include sanitary facilities and auxiliary parking lots (if applicable).
2. **PROPERTY OWNER** written permission. *Verbal permission given, written letter forthcoming.*
3. **CERTIFICATE OF INSURANCE / WAIVER OF SUBROGATION** naming **both** of the following as "additionally insured":
 - Long Grove Business and Community Partners
 - Village of Long Grove
4. **ROADS & BARRICADES** - Indicate the areas of the roadway and parking that will need to be closed and barricaded for this event. Fees may apply. *Only the entrance to the private driveway will be closed.*
5. **SECURITY and SHERIFF'S RESERVES** - Provide the estimated number of security and Sheriff Reserves needed and the times for each. Cost for security: \$70/hour per deputy. Payment must be submitted with application. *We will provide a Cert member.*
 - A. Security officers # _____ Hours _____ to _____
 - B. Traffic officers / Reserves # _____ Hours _____ to _____
 - C. Parking Assistance # 1 Hours 10:00 to 5:30
6. **SIGNAGE** - Indicate whether there will be any of the following:
 Before ordering banners or temporary signs, signage must be approved by the LGBCP and the Village Planner. Contact info: LGBCP – info@visitlonggrove.com / Village Planner – jhogue@longgrove.net
 - A. Banners Yes No
 - B. Temporary Signs Yes No
 - C. Other Signage (specify) Yes No
 If you answered "yes," provide a design, location, time to be placed and written permission of the owner(s) where these items will be placed. *Only on townner property*
7. **PR & ADVERTISING** - check all that apply:

<input checked="" type="checkbox"/> Newspapers	<input type="checkbox"/> Cable T.V.	<input checked="" type="checkbox"/> Internet
<input checked="" type="checkbox"/> Newsletters / e-blasts	<input type="checkbox"/> Commercial T.V.	<input type="checkbox"/> Radio
<input type="checkbox"/> Direct Mailings	<input type="checkbox"/> Trade Magazines	<input checked="" type="checkbox"/> Other (specify) Fomecore Signs

 Use of the LGBCP logo requires proof and approval by the LGBCP Mktg. Committee. Inclusion on LGBCP's Web-site, Press Releases and Newsletters requires written request, and may be subject to fees. LGBCP Contact Info: info@visitlonggrove.com
8. **ELECTRICAL NEEDS** - Provide specifics as to mechanical or electronic rides, demonstrations, displays, music, etc.. *Will only use existing power, no special needs or usage required*
9. **OUTSIDE SERVICES** – must be supplied by a licensed / insured provider, conform to LGBCP appearance guidelines and are subject to Village Fire Marshall and Sheriff inspection / approval.

Service	Qty.	Contact	Company	Phone
Sanitation / Port-o-lets	1		<i>Service Sanitation</i>	
Waste Disposal				
Trash Pickup, Walks, etc.				
Music / Staging				
White Tent, Rental, Labor				
Other				

10. ALL VENDORS must

- Complete a "Vendor Application." *
- Provide their Illinois Sales Tax ID number as required and submit a form indicating filing of all sales occurring in the Village of Long Grove. Sales Tax Rate is 8%.
- Conform to LGBCP appearance guidelines and are subject to Health Dept., Village Fire Marshall and Sheriff inspection / approval.
- Food Vendors must contact the Lake County Dept. of Health (847-360-6700) to apply for a permit.

11. CHARITY BENEFIT – If a charity is benefiting from this event, Proof of Non For Profit Tax Exempt Status, legal name of the charity, address, contact name and phone number.

Fund Raizer for the Long Grove Arts and Music Coun and Art Guild

12. RAFFLES – Submit "Application for License to Conduct Raffle." Raffles must be pre-approved by the Village of Long Grove Board of Trustees. **

13. LIQUOR – Submit "Temporary Liquor License" application with specific address. If liquor is being offered, on a site, other than that which is stated on A State of Illinois Liquor License, then a Temporary Liquor License must be applied for and issued. Applications may be downloaded at www.illinois.gov/license.cfm. **

.....
* Vendor Applications can be found on the LGBCP web-site @ visitlonggrove.com under "Applications."

**For a License to Conduct a Raffle Application or a Temporary Liquor License Application, please visit the Village of Long Grove web-site at longgrove.net, under "Forms."

EVENT ORGANIZER FEES:

Fees are determined by The Village of Long Grove and / or The LGBCP Board of Directors.

Application Processing Fee:	\$ 25
Village Usage Fee:	\$ _____
Tent Fire Inspection Fee (if applicable)	\$ 25
Other: _____	\$ _____
TOTAL FEES	\$ _____

Please read this form carefully and be aware that in signing, you will be waiving and releasing all claims arising out of this event.

All businesses, sponsors, vendors and merchants, participating in B1 District outdoor events, are required to comply with, and receive approval from, both, the LGBCP Board and The Village Board of Trustees

ACKNOWLEDGEMENT/ASSUMPTION OF RISK OF INJURY

I am fully aware of the details of the LGBCP event(s) and the risks inherent in the event. I recognize and acknowledge that this may include risks of bodily injury and / or death. I agree to and assume full risk of injuries, including death, and of all costs, damages, and losses that may be sustained as a result of participating in any and all activities connected with or associated with such event.

WAIVER AND RELEASE OF CLAIMS FOR INJURY

I hereby agree to, and do waive, release and relinquish all claims of every kind, known and unknown, present and future, that I may have against the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees, arising out of, connected with, or in any way related to, the event or my participation therein.

INDEMNITY AND DEFENSE

I hereby further agree to indemnify and hold harmless and defend the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees from any and all claims of every kind, known and unknown, present and future, that I may have arising out of, connected with, or in any way related to the program or my participation therein. My signature also allows the use my photo for promotional purposes. My signature on this form indicates that I have read and understand the above Waiver and execute it of my own free will and without any reservation.

All information submitted is part of the application process to obtain the Long Grove Business and Community Partners (LGBCP) Board of Directors recommendation, to the Village Board of Trustees, to participate in or hold a specific event in the B-1 Historic Business District. The event date is for the upcoming year and all of the information is accurate to the best of my knowledge

I have read and understand the above


Signature of Applicant

8 / 18 / 2015
Date

LGBCP Board Approval _____

Events Committee Chair Signature

_____/_____/_____
Date

Village Board of Trustees Approval _____

Village Representative Signature

_____/_____/_____
Date

3/6/2015ef

August 18, 2015

Dear Long Grove Business and Community Partners and
Long Grove Board of Trustees

Please be advised that the Long Grove Artist Guild in conjunction with the Long Grove Arts and Music Council have my permission for the use of the Towner Green property for their Back Seat and Trunk art show. This one day event is scheduled for October 24th from 10:00 – 5:30 which includes their set up and tear down time.

Thank you

A handwritten signature in black ink that reads "Wendell Towner". The signature is written in a cursive, flowing style.

Wendell Towner
Towner Properties

UNWIND

EPILOGUE

Acoustic
MUSIC

- 1
- 2
- 3
- 4
- 5
- 6
- 7
- 8
- 9
- 10
- 11
- 12

- 13
- 14
- 15
- 16
- 17
- 18
- 19
- 20
- 21
- 22
- 23
- 24

signage on the green

Side walk

Driveway closed
to traffic

Side walk

OLD mcHENRY

Long Grove Artists Guild's Back Seat Gallery & Trunk Show!

What is a "Back Seat Gallery"???

The inspiration for such a gallery came after an artist friend stopped at my home after an art class to show me what she had been working on – and I teased her about her "back seat gallery".

It was fun and informal to just stand there outside by her car, looking, laughing, and discussing art. We decided the experience would be great fun to share with others. What a simple way to set up an art experience! No framing needed. No hanging. Just pull up, park, and open your doors! Look. Laugh. Talk art. Talk life. Have a bite to eat. Maybe even pull out a canvas or sketchpad and do a little art together. Perhaps even sell or trade some art! At the end of the day, close the doors, wave goodbye and drive away home.

The "Back Seat Gallery" idea was born.

The public is invited to come join in the fun and hopefully even purchase that perfect piece of art!

If you are an artist with a good sense of humor and want to be a part of the Long Grove Artists Guild's Inaugural "Back Seat Gallery & Trunk Show", please contact Georgia for more information and entry form to reserve a space now, as spaces are *very* limited.

Artwork can be sold through the Long Grove Arts & Music Council. 20% of proceeds from each sale are donated by the artist to this 501c3 organization. Tax deductible.

The Show will take place Oct 24th along Towner Green in Long Grove. The lane will be blocked off from traffic from 10-5PM. Participants must be in reserved spaces by 10AM and ready to meet the public by 11:00 am. All participants must stay until 5PM.

georgia@lgamc.org (847)438-1160

EVENT ORGANIZER SPECIAL EVENT APPLICATION CHECKLIST

*Approved by LGBCP 8/18/15
TO: TRUSTEES % DAVE L.*

Long Grove Historical Society's Ghost Walk
October 30, 2015
7:00pm - 10:00pm

X	Event Application	Received 8/10/15 via email
X	Date & Time	8/30/15 7:00pm - 10:00pm
	Site Plan	
	Property Owner Permission	
	COI & Waiver Certificates	
	Roads & Barricades	
	Security & Sheriff	
	Signage	
	Electrical	N/A
	Vendors & Support Docs.	N/A
	Temp Liquor License App.	N/A
	App. To Conduct Raffle	N/A
	Applicable Fees	

Application Received: 8/10/2015

Reviewed by LGBCP Events Committee: 08 / 12 / 15 **Approved** **Rejected**

Pending:

Reviewed by LGBCP Board: 08 / 18 / 15 **Approved** **Rejected**

Pending:

Reviewed by Village Board of Trustees: / / **Approved** **Rejected**

Pending:



SPECIAL EVENT APPLICATION

- FOR OFFICE USE ONLY**
- Site Plan
 - Raffle Application
 - Temp. Liquor License App.
 - Event Application
 - Property Owner Permission
 - Insurance Certificate

Please complete this form in its entirety. This application must be submitted a minimum of 90 days prior to the event.

Applications should be mailed, faxed or e-mailed to the Long Grove Business and Community Partners (LGBCP) and the Village of Long Grove:

Information Center
 308 Old McHenry Road
 Long Grove, IL 60047

 847-634-0888
 Fax: 847-634-3673
 infocenter@longgrove.org

Sherry Shlagman
 Village of Long Grove
 3110 RFD
 Long Grove, IL 60047
 847-634-9440
 Fax: 847-634-9408
 sshlagman@longgrove.net

Submittal Date: 8/10/2015 Date Received by LGBCP: _____

EVENT INFORMATION

Event Name & Location(s): Third Annual Long Grove Historical Society's Ghost Walk
 Description/Type of Event: Guided tours through the historic downtown with several historic themed, staged skits that have a spooky flavor.
 Event Date: 10/30/2015 Hours: 7pm to 10pm

Set Up for Event
 Date: 10/30
 Hours: 5pm to 7pm

Dismantling of Event
 Date: 10/30
 Hours: 10pm to 11pm

Estimated Number of Attendees: 200

Estimated Number of Vendors: None

Sponsoring Organization: Long Grove Historical Society
 Street Address: 338 Old McHenry Rd
 City: Long Grove State: IL Zip Code: 60047
 Phone Number: 847 478-5140 Fax Number: _____
 Contact Person: Aaron Underwood Phone Number: 847-478-5140
 E-mail Address: Aaron @ aunder.com

We would like to use Sunset Pavilion as our starting point. The route will be on public property with each tour lasting about 45 minutes. While the number of pedestrians created by our event would fall within normal public use of the downtown, it's likely unusually high for the after dark hours, so whatever assistance we can get with safe pedestrian use of the downtown crosswalks would be appreciated.

Additional Information

Include with this application the following:

1. A site plan of all areas of the B-1 District covered by the event. On the plan, mark the sanitary facilities and auxiliary parking lots (if applicable).
2. Written permission from property owners
3. Certificate of insurance naming **both** Long Grove Business and Community Partners and Village of Long Grove as additionally insured.
4. Indicate the requested areas of the roadway and parking that will need to be closed and barricaded for this event if it applies.
5. Provide the number of security and police officers needed and the times for each (if required per approval) (Cost for security: \$70/hour per deputy. Payment must be submitted with application):

A. Security officers	_____	Hours _____ to _____
B. Traffic officers	_____	Hours _____ to _____
C. Parking Assistants	_____	Hours _____ to _____

6. Indicate whether there will be any of the following:
(before ordering banners or temporary signs, check with the Village Planner – 847-634-9440)

- A. Banners Yes No
- B. Temporary Signs Yes No
- C. Other (specify) _____

If you answered yes provide a design, location, time to be posted and written permission of the owner(s) where these items will be posted.

7. Indicate promotional materials and advertising to be used (check all that apply):

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Newspapers | <input type="checkbox"/> Cable T.V. | <input checked="" type="checkbox"/> Internet |
| <input checked="" type="checkbox"/> Newsletters | <input type="checkbox"/> Commercial T.V. | <input type="checkbox"/> Radio |
| <input type="checkbox"/> Direct Mailings | <input type="checkbox"/> Trade Magazines | <input type="checkbox"/> Other (specify) |

8. Please provide specifics as to the use of any mechanical or electronic rides, demonstrations, displays, music, etc.

9. Services provided at event:

Service	Contact Name	Company	Address	Phone Number
Sanitation/Portable Restrooms	None			
Waste Disposal/Garbage				
Tents				
Music				
Other				

10. Provide a list of all vendors and their Illinois sales tax identification number. Provide each vendor with notice or form indicating they are filing all sales occurring in the Village of Long Grove. Sales tax rate for the Village of Long Grove is 8%. **Food vendors should contact the Lake County Department of Health (847-360-6700) to apply for a permit.**
11. If there is a charity involved or benefiting from this event, please provide the name of the charity, contact name and a phone number. *Long Grove Historical Society*
12. Raffle – Submit “Application for License to Conduct Raffle.” Raffle must be approved by the Village Board prior to the event.*
13. Liquor – Submit “Temporary Liquor License” Application. **Please note that a State of Illinois Liquor License is also required. Applications may be downloaded at www.illinois.gov/license.cfm.***

* For additional copies of the Event Application or to obtain an Application for License to Conduct Raffle, or Temporary Liquor License Application please visit the Village of Long Grove website at www.longgrove.net. Applications can be found under the heading “Administration.”

All the information submitted is as part of an application to the Long Grove Business and Community Partners to obtain their recommendation to the Village Board to hold a specific event in the B-1 Historic Business District. The event date is for the upcoming year and all of the information is accurate to the best of my knowledge.

Please read this form carefully and be aware that in signing up and participating in this event you will be waiving and releasing all claims arising out of this program. In consideration of the Village sponsoring and providing the above event and accepting me as a participant in the above event, I agree as follows:

ACKNOWLEDGEMENT/ASSUMPTION OF RISK OF INJURY

I have fully informed myself of all the details of the LGBCP event(s) and the risks inherent in the event. I recognize and acknowledge that they may involve risks of bodily injury and death. I agree to and assume the full risk of any injuries, including death, and of all costs, damages, and losses that I may sustain as a result of participating in any and all activities connected with or associated with such event.

WAIVER AND RELEASE OF CLAIMS FOR INJURY

I hereby agree to, and do waive, release and relinquish all claims of every kind, known and unknown, present and future, that I may have against the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees, arising out of, connected with, or in any way related to, the event or my participation therein.

INDEMNITY AND DEFENSE

I hereby further agree to indemnify and hold harmless and defend the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees from any and all claims of every kind, known and unknown, present and future, that I may have arising out of, connected with, or in any way related to the program or my participation therein. My signature also allows the use my photo for promotional purposes. My signature on this form indicates that I have read and understand the above Waiver and execute it of my own free will and without any reservation.



Signature of Applicant

8/10/2015
Date