

Visitors' Business:

Special Event Applications:

Congregation Beth Judea Rummage Sale

Fine Art & Wine Fest

Lunch On The Green



RECEIVED

JUN 04 2010

FOR OFFICE USE ONLY

- Site Plan
- Raffle Application
- Temp. Liquor License App.

VILLAGE OF LONG GROVE
SPECIAL EVENT APPLICATION

3 PAGES

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:

John Maguire
 LGBCP
 146 Old McHenry Road
 Long Grove, IL 60047
 847-634-0888
 Fax: 847-634-3673
jmaguire@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: 6/4/10 Date Received by LGBCP: _____

EVENT INFORMATION

Event Name & Location(s): RUMMAGE SALE - CONG. BETH JUDEA RFD 5304

Description/Type of Event: SALE OF DONATED USED CLOTHING, HOUSEWARES, Toys, etc.

Event Date: 8/8/2010 Hours: 8:00 AM to 3:00 PM
 Event Date: _____ Hours: _____ to _____
 Event Date: _____ Hours: _____ to _____

Set Up for Event

Event Date: 8/1-8/7 DONATIONS TO BE Hours: _____ to _____
 Event Date: DROPPED OFF & SET-UP Hours: _____ to _____
 Event Date: _____ Hours: _____ to _____

Dismantling of Event

Event Date: _____ Hours: _____ to _____
 Event Date: _____ Hours: _____ to _____
 Event Date: _____ Hours: _____ to _____

Estimated Number of Participants: 100

Estimated Number of Vendors: 0

Sponsoring Organization: CONGREGATION BETH JUDEA SISTERHOOD
 Street Address: RFD. 5304
 City: LONG GROVE State: IL Zip Code: 60047
 Phone Number: 847-634-0777 Fax Number: 847-634-8055
 Contact Person: RENEE LUSTIG Phone Number: 847-537-7265
 E-mail Address: BETHJUDEA@aol.org

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 required and the times for each (Cost for security: \$70/hour per deputy. Payment must be submitted with application):

A. Security officers	<u>0</u>	Hours _____ to _____
B. Traffic officers	<u>0</u>	Hours _____ to _____
C. Parking Assistants	<u>0</u>	Hours _____ to _____

6. Indicate whether there will be any of the following:

A. Banners	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
B. Temporary Signs	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> 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 type="checkbox"/> Newsletters	<input type="checkbox"/> Commercial T.V.	<input type="checkbox"/> Radio
<input checked="" 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				
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. **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.
- 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.***

All the above information is submitted 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.



 Signature of Applicant

 6/14/10

 Date

* 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."



SPECIAL EVENT APPLICATION

- FOR OFFICE USE ONLY**
- Site Plan
 - Raffle Application
 - Temp. Liquor License App.
 - Temp. Business Lic. App.
 - 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:

John Maguire
 LGBCP
 146 Old McHenry Road
 Long Grove, IL 60047
 847-634-0888
 Fax: 847-634-3673
 jmaguire@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: June 11th, 2010 Date Received by LGBCP: _____

EVENT INFORMATION

Event Name & Location(s): Long Grove Fine Art & Wine Festival
 Description/Type of Event: 22nd Annual Art Fest plus wine tasting, entertainment, food vendors and sponsors.

Event Date: August 14th & 15th, 2010 Hours: 10 AM to 5 pm

Set Up for Event

Date: 8/12/10
 Hours: 5:30 pm to 8:30 pm

Dismantling of Event

Date: 8/15/10
 Hours: 5 pm to 10 pm

Estimated Number of Attendees: 5000

Estimated Number of Vendors: 125

Sponsoring Organization: Kildeer Countryside PTO / Long Grove Partners

Street Address: 3100 Old McHenry Rd.

City: Long Grove

State: IL Zip Code: 60047

Phone Number: (847) 540-6889

Fax Number: —

Contact Person: Deborah Pentek

Phone Number: (847) 540-6889

E-mail Address: debpentek@comcast.net

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. *Archer parking lot from Archer Road East and Robert Parker Coffin Rd. entrance.*
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 4 (provided by event) Hours 9pm to 7 Am
 B. Traffic officers 0 Hours can posted - unmanned.
 C. Parking Assistants 0 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):

Newspapers Cable T.V. Internet
 Newsletters Commercial T.V. Radio
 Direct Mailings Trade Magazines Other (specify)

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

*- Portable stage with live music amplification during show hours (see site plan).
 - Artists & vendors to use on-site power.*

9. Services provided at event:

Service	Contact Name	Company	Address	Phone Number
Sanitation/Portable Restrooms	Waste Management ↔	John Herger		
Waste Disposal/Garbage	John Herger	Waste Management		
Tents	TBD	TBD		
Music	TBD	TBD		
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. *Kildeer Countryside PTO / LGBCP*
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.** *(Attached)*

* 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

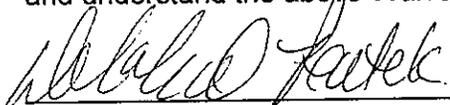
I have fully informed myself of all the details of the LGBCP event(s) and the risks inherent in the event. I recognize and acknowledge that they may involve risks of bodily injury and death. I agree to and assume the full risk of any injuries, including death, and of all costs, damages, and losses that 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

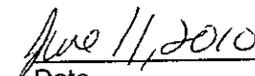
I hereby agree to, and do waive, release and relinquish all claims of every kind, known and unknown, present and future, that I may have against the Village of Long Grove, the Long Grove Business & Community Partners and their officers, agents, servants and employees, arising out of, connected with,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

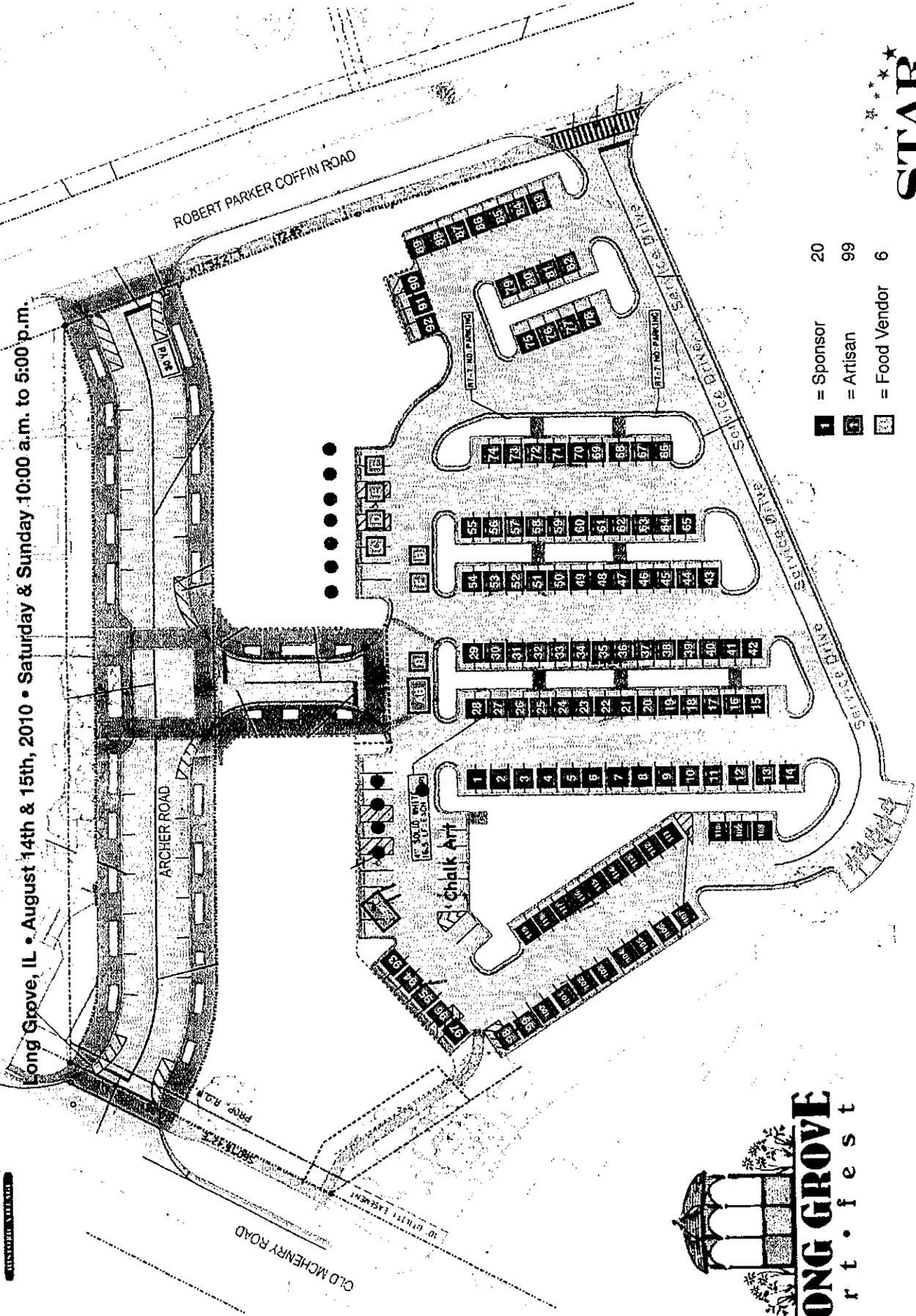


Date

Long Grove Fine Art Fest | Featuring the Wine & Dine

Proposed Venue Map

Long Grove, IL • August 14th & 15th, 2010 • Saturday 10:00 a.m. to 5:00 p.m.



- 1 = Sponsor 20
- 13 = Artisan 99
- 16 = Food Vendor 6



StarEvents, LLC ★ 1609 W. Belmont, 2nd Floor ★ Chicago, IL 60657 ★ 773.665.4682 ★ Fax 773.665.4866



FOR OFFICE USE ONLY

Site Plan

Raffle Application

Temp. Liquor License App.

SPECIAL EVENT APPLICATION

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:

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 Fax: 847-634-3673
jmaguire@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: _____ Date Received by LGBCP: _____

EVENT INFORMATION

Event Name & Location(s): LUNCH ON THE GREEN

Description/Type of Event: picnic lunches, music, and art.

Event Date: 6/4, 6/11, 6/18, 7/2, 7/9, 7/16
 Event Date: 7/23, 7/30, 8/6, 8/13, 8/20, 8/27
 Event Date: 9/3, 9/10

Hours: 11am to 3pm
 Hours: _____ to _____
 Hours: _____ to _____

Set Up for Event

Event Date: SAME AS EVENT DATE
 Event Date: _____
 Event Date: _____

Hours: 10AM to 11AM
 Hours: _____ to _____
 Hours: _____ to _____

Dismantling of Event

Event Date: SAME AS EVENT DATE
 Event Date: _____
 Event Date: _____

Hours: 4pm to 5pm
 Hours: _____ to _____
 Hours: _____ to _____

Estimated Number of Participants: 30-50

Estimated Number of Vendors: 1

John Maguire, Executive Director
 Long Grove Business and Community Partners
 307 Old McHenry Road, Long Grove, IL 60047
 Direct Line: 847-634-0888 Direct Fax: 847-634-3673
jmaguire@longgrove.org

Sponsoring Organization: Timmys Sandwiches and Ice Cream
 Street Address: 132 Old McHenry Rd
 City: Long Grove State: IL Zip Code: 60047
 Phone Number: 847-983-8930 Fax Number: _____
 Contact Person: Tim Almy Phone Number: 224-612-1220
 E-mail Address: t_cream@att.net

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. Covered
- ✓ 4. Indicate the requested areas of the roadway and parking that will need to be closed and barricaded for this event if it applies. N/A
- ✓ 5. Provide the number of security and police officers required and the times for each (Cost for security: \$70/hour per deputy. Payment must be submitted with application):

<u>N/A</u>	A. Security officers	<u>N/A</u>	Hours _____ to _____
	B. Traffic officers	<u>N/A</u>	Hours _____ to _____
	C. Parking Assistants	<u>N/A</u>	Hours _____ to _____

6. Indicate whether there will be any of the following:

- 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. Approved by LONG GROVE VILLAGE WITH PERMIT

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 checked="" 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	Self			
Waste Disposal/Garbage	WASTE MANAGEMENT			
Tents	SELF	Timmys		
Music	SELF	Timmys		
Other				

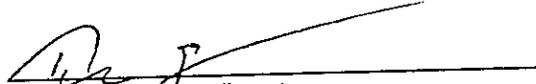
10. Provide a list of all vendors and their Illinois sales tax identification number. Provide each vendor with notice or form indicating they are filing all sales occurring in the Village of Long Grove. **Food vendors should contact the Lake County Department of Health (847-360-6700) to apply for a permit. Artist @ Heart # 3906-1469**

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.

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.***

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Signature of Applicant

6-3-10
Date

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John Maguire, Executive Director
Long Grove Business and Community Partners
307 Old McHenry Road, Long Grove, IL 60047
Direct Line: 847-634-0888 Direct Fax: 847-634-3673
jmaguire@longgrove.org

June 3, 2010

To whom it may concern:

I approve Timmy's Sandwiches and Ice Cream to hold Lunch on the Green on Towner Green for the following dates:

6/4, 6/11, 6/18, 7/2, 7/9, 7/16, 7/23, 7/30, 8/6, 8/13, 8/20, 8/27, 9/3

During the hours of 11AM- 3PM

Sincerely, *Mandall Joerny*

Towner Properties