

Visitors' Business:

Special Event Applications:

Porsche Club Concours – June 17th (Fathers Day)

Verizon Grand Opening – Sunset Grove Center

approved



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
 307 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: 03/29/2012 Date Received by LGBCP: _____

EVENT INFORMATION

Event Name & Location(s): Porsche Club of America Father's Day Concours
 Description/Type of Event: Competitive car show

Event Date: 6/17/2012 Hours: 9:00AM to 3:00pm

Set Up for Event

Date: 6/17/2012
 Hours: 8:30am to 9:00 am

Dismantling of Event

Date: 6/17/2012
 Hours: 3:00pm to 3:30pm

Estimated Number of Attendees: 50-100 people
50 Cars Estimated Number of Vendors: 0

Sponsoring Organization: Porsche Club of America - Chicago Region
 Street Address: c/o John W. Diwik 29W090 Lakeside Dr.
 City: Naperville State: IL Zip Code: 60564
 Phone Number: 630 962-9224 Fax Number: 312-544-5704
 Contact Person: John W. Diwik Phone Number: 630 962 9224
 E-mail Address: Jodiwik@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.
- 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 NA Hours _____ to _____

B. Traffic officers NA Hours _____ to _____

C. Parking Assistants NA 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.

NA

9. Services provided at event:

Service	Contact Name	Company	Address	Phone Number
Sanitation/Portable Restrooms	NA			
Waste Disposal/Garbage	NA			
Tents	NA			
Music	NA			
Other	NA			

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.
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

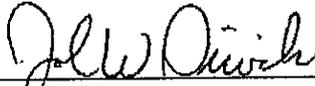
I have fully informed myself of all the details of the LGBCP event(s) and the risks inherent in the event. I recognize and acknowledge that they may involve risks of bodily injury and death. I agree to and assume the full risk of any injuries, including death, and of all costs, damages, and losses that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

3/29/12

Date



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Long Grove, IL 60047
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Fax: 847-634-9408
sshlagman@longgrove.net

Submittal Date: 04/19/12 Date Received by LGBCP: _____

EVENT INFORMATION

Event Name & Location(s): Verizon Wireless Zone Open House
Description/Type of Event: _____

Event Date: 05/01/12 - 05/30/12 Hours: 9:00am to 8:00pm

Set Up for Event

Date: 05/01/12
Hours: 9:00am to 8:00pm

Dismantling of Event

Date: 05/30/12
Hours: 9:00am to 8:00pm

Estimated Number of Attendees: _____

Estimated Number of Vendors: _____

Sponsoring Organization: Verizon Wireless Zone Long Grove
Street Address: 4188 IL Route 83
City: LONG GROVE State: IL Zip Code: 60069
Phone Number: 847-383-5545 Fax Number: _____
Contact Person: ELINA RUDIK Phone Number: 847-514-2081
E-mail Address: elinarudik@yahoo.com

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 _____

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(before ordering banners or temporary signs, check with the Village Planner – 847-634-9440)

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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				

Verizon Wireless Sales Tax ID 4028-2120

Verizon Wireless Fed 26-2483869- ID

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.**
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Signature of Applicant

04/19/12
Date

veri onwireless
Authorized Retailer

