



City of Aurora

City of Aurora, 44 E. Downer Pl. Aurora, Illinois 60505 • Phone (630) 256-3070 • Fax (630) 256-3079

Isabel M. Garcia-Kodron
City Clerk

APPLICATION FEE: _____
DATE RECEIVED: _____
DATE PAID: _____
DATE APPROVED: _____
RESOLUTION NO: _____

CITY OF AURORA, ILLINOIS **CARNIVAL LICENSE APPLICATION**

(A COMPLETE ORIGINAL APPLICATION MUST BE SUBMITTED TO THE CITY CLERK'S OFFICE NO LATER THAN 60 DAYS PRIOR TO THE START OF THE EVENT)

Name of Applicant Windy City Amusements Inc.
Address where carnival is to be held Northgate 886-954 N. Lake St.
Zoning classification of proposed location _____
Date(s) of carnival operation (may not exceed five (5) days) Aug 7-9, 2015
Hours proposed to be open to the public Fri 5-10pm Sat 4-10pm Sun 1-10pm

REQUIREMENTS:

- Completed *City of Aurora Carnival License Application*
- Application fee of \$100 per event (maximum of five (5) consecutive days)
- Letter from the sponsoring organization indicating type and/or amount of contribution
- Completed *Entertainment Information Form*
- Aurora Fire Prevention Bureau *Assembly Operational Permit*
- Food & Beverage Tax registration form
- Security Requirement form
- Written letter of permission from property owner
- Illinois Department of Labor *Amusement Rides and Attractions Permit*, and all ride inspection certificates
- Diagram showing the number and location of each of the following: toilet facilities, entertainment, and available off-street parking spaces
- Certificate of Insurance with the owner, lessee, proprietor, operator or manager of the carnival, as well as those persons acting in a similar capacity with respect to each entertainment, performance or exhibit which make up the carnival, as named insureds or such of them as required by the city council, naming the City of Aurora as additional insured. Minimum limits of \$1,000,000.00 covering public liability and property damage and \$3,000,000.00 aggregate, such policy insuring liability that may arise from the operation or maintenance of the carnival or any part thereof.
- Restoration / Performance bond of no less than \$5,000.00 with City of Aurora as the obligee

- Local County Health Department certificate for any food concessions for the length of the carnival
- USDA licenses for any animals appearing at the carnival
- List of all carnival workers for this event
- List of accidents within the past five (5) years, if applicable
- Amplifier Permit, if applicable
- Tent Permit, if applicable

NOT-FOR-PROFIT SPONSOR INFORMATION:

Not-for-profit sponsor name _____

Date of Incorporation as a not-for-profit 501 (c)(3) _____

Business address of sponsor _____

Representative for sponsor _____ Contact telephone no. _____

CARNIVAL OPERATION:

Carnival Company:

Windy City Amusements Inc 914 W. Main St St. Charles IL 60174 (630) 443-4547
 Name Address Phone

Carnival operator/manager:

Tony Salerno 914 W. Main St. St. Charles IL 60174 (630) 327-7152
 Name Address Phone

Site supervisor, if other than above listed operator/manager:

 Name Address Phone

Names of owner(s), lessee(s) or proprietor(s) of carnival:

Tony Salerno _____
Ruth Salerno _____

Number of off-street parking spaces available:
 1-15 _____ 15-30 _____ 30-50 _____ 50 or more _____

Number of toilet facilities available for use by patrons of carnival: 4

Will liquor be sold or served at the carnival? Yes ___ No

(If so, please present a Temporary Liquor Permit application and all applicable requirements).

Will you be conducting a raffle at the carnival? Yes ___ No

(If so, please present a Raffle License application and all applicable requirements).

EMPLOYEE INFORMATION:

Do you maintain an accurate and comprehensive (i.e. driver's license information, social security information, etc.) list of your carnival workers? Yes No ___

(The City of Aurora reserves the right to inspect the list of workers on the site.)

Do you conduct pre-employment or random drug screening of your employees? Yes No ___

Do you maintain a mobile drug testing unit in order to test for controlled substances immediately prior to the day's operations? Yes No ___

Do you check the Illinois Sex Offender Registry website prior to hiring an employee? Yes No ___

Are any child sex offenders employed by the carnival/circus operator? Yes ___ No

(Pursuant to 720 ILCS 5/11-9.4(c), it is a Class 4 Felony for a child sex offender to knowingly operate, manage, or be employed by, volunteer at or knowingly be present at any facility providing programs or services exclusively directed towards children.)

Do you conduct a criminal background check of potential employees? Yes No ___

Are any carnival employees fugitives from Illinois or any other state's law enforcement agencies? Yes ___ No

EQUIPMENT INFORMATION:

Do you maintain maintenance and repair records for the past eighteen (18) months? Yes No ___
(The City of Aurora reserves the right to inspect maintenance and repair records on site.)

Does each ride have with it the appropriate technical manuals and user's guide? Yes No ___

OPERATOR INFORMATION:

Have you had any accidents in the last five (5) years? Yes No ___

(The City of Aurora reserves the right to have access to the results of any investigations conducted pursuant to any accidents.)

Are your procedures in compliance with Outdoor Amusement Business Organization standards? Yes No ___

Are your procedures in compliance with U.S. Consumer Product Safety Commission standards? Yes No ___

Are you in compliance with the Illinois Carnival & Amusement Rides Safety Act? Yes No ___

HOLD HARMLESS AGREEMENT:

I, the owner(s), lessee(s), proprietor(s) or manager(s) do hereby hold the City of Aurora harmless from all liability resulting from the operation of said carnival, and further agree to indemnify said City of Aurora from liability resulting from any injury to patrons, bystanders, passersby or any individuals as a result of the operation or maintenance of the carnival as herein defined.

AFFIDAVIT

I, first being duly sworn, under oath, deposes and say that I am an applicant for the license requested in the foregoing application; that I am of good repute, character, and standing, and that answers to the questions asked in the foregoing application are true and correct in every detail. I further state that I have read and understand the Code provisions in the City of Aurora's Carnivals and Circuses Ordinance. I further agree not to violate any of the laws of the United States, the State of Illinois or any of the ordinances of the City of Aurora in the conduct of my place of business.

I ALSO UNDERSTAND THAT AN UNTRUE, INCORRECT, OR MISLEADING ANSWER GIVEN IN THIS APPLICATION IS SUFFICIENT CAUSE FOR THE REFUSAL TO GRANT, OR THE REVOCATION OF ANY LICENSE GRANTED PURSUANT TO THIS APPLICATION.

I further give my permission to the City of Aurora or any agency thereof to check with any agency or individual named or referred to in this Application to verify or clarify any answer that I have given.

Signed and dated this 13th day of May, 2015.

Tim Nelson
Signature
(Circle one: owner / lessee / proprietor / manager)

Denise Blettner
Signature
(Sponsor)

Tim Nelson
Name (Print or type)

Denise Blettner
Name (Print of type)

Signed and sworn to before me this 13th day
of May, 2015.

[Signature]
Notary Public

