## **Aurora Fire Department**

Fire Prevention Bureau. 5 E. Downer Pl. #G Aurora, IL 60505-3305 30) 256-4130 / Fax (630) 256-413

Fire Marshal Javan Cross

Web: www.aurora-il.org

(630) 256-4130 / Fax (630) 256-4139 Email: fpb@aurora-il.org



## Application for Assembly Operational Permit Section 105.6.4

Normal Use S

**Special Event** 

Site Plan \_\_Evacuation Plan \_\_Fire Safety Plan \_\_Seating Plan \_\_Crowd Control \_\_Occupant Load \_\_

Carnival Fair

Circus Special Amusement

	The Type
Event (Business) Name Fox Valley Mall Spring Carnival	Date(s) of Event April 26-29 & May 3-6, 2018
Location of Event 195 Fox Valley Center Aurora, IL	Hours: TH 6-10PM, Fri 6-11PM, Sat 2-11PM, Sun 2-10PM
Applicant's Name Fantasy Amusement Co, Inc.	Phone # 847-259-9090
Address 629 N. Forrest Ave. Arlington Heights, IL 60004	
Cell # 847-271-9089 Fax # 847-392-1589	E-mail Address:fac9090@comcast.net
Class of Assembly (circle all that apply)	
Above Grade Below Grade At Grade Out:	side X
Over 600 Over 1000 Occupant load posted? Y	_ N
Fire Extinguishers present? Y X N How Many Kitchen present? Y N Liquor License: Y N	
Kitchen present? Y N Liquor License: Y N	Class of Liquor License:
No smoking signs posted: N/A Y N  Fire Alarm: Y N Sprinkler System: Y N	Hood Systems V N
Live Entertainment? NA Y NX Sometimes	How Offen?
Type: Band DJ Other (explain)	now Oilen:
Stage: None X Temporary Permanent	
Will you use a smoke machine? Y N _x Will you use	Pyrotechnic Displays? Y N X
Method to determine number of occupants present: Ticket	sales: Door Presales Both provide ticket manifest
Describe	
Size of tent Number of exits (attact Electric exit signs Y N Emergency light Y N How is electrical power being supplied? Generator *NOTICE: No smoking, no combustibles (hay, straw, and like within twenty (20) feet of the tent.	- -
Documents required for all Assembly Uses *(attach copies)	
• Provide site plan (indicate lot lines, parking, tents, build	ding streets and vendors)
Provide information on Emergency Evacuation plan and Fire Safety Plan**	
Seating Plan (provide copy)	- 1 1 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
Crowd control manager(s) name (1 per 250 occupants. Attach list of names and certificates)	
* For class go to: https://crowdmanagers.com/train	
<ul> <li>Letter from property owner-permission for use of land</li> </ul>	
*All requests for drawings may be on one plan as lor	ng as it is clear
Presence of Police Officers Required? Y X N	
Contact Aurora Police Department 630-256-5700 for requirements.	
The above information is true to the best of my knowledge. False or	incorrect information may result in permit being revoked.
William Johnson	1/15/2018
Applicant signature Print Name	Date
PERMIT MUST BE SUBMITTED TWO WEE	
Office Use	