

# City of Aurora, Illinois Carnival / Circus License Application



Applications must be submitted at least 60 days prior to the start of the event.

Completed applications may be submitted to: City Clerk's Office, 44 E. Downer Pl.

Official Use Only					
□ Application Fee \$100.00	☐ Certificate of Insurance	□ Resolution No			
□ Date Received	☐ Restoration Bond	□ Control No			
□ Date Approved	☐ Zoning Classification of F	Proposed Location			
Required Information					
□ Completed Application	☐ Assembly Operational Pe	ermit			
☐ Application Fee ☐ Food & Be	verage Tax Registration	☐ Entertainment Information Form			
☐ Letter of Permission from Proper	ty Owner □ U	SDA Licenses for Animals (if applicable)			
☐ Amplifier Permit (if applicable)	fier Permit (if applicable)				
☐ Letter from Sponsoring Organizat	tion Indicating Type and/or A	mount of Contribution			
☐ Illinois Department of Labor "Amu Certificates	usement Rides and Attraction	ns Permit" and all Ride Inspection			
☐ Certificate of Insurance (see pg. 4	4) □ Restoration/Perfo	ormance Bond (see pg. 4)			
☐ Health Department Certificate					
List of: □ All Carnival Workers	□ Accidents within the past	t five (5) years			
Diagram showing:					
□ Number & Location of Toilet Faci	lities   □ Entertainment	☐ Available Off-Street Parking			
Event Information					
	Interest of Co	1,40			
Event Name: United	_ 1				
Event Location: Chicag	)				
Event Location Address: 1105	NA 15	13, 2018			
Event Date(s) (May not exceed fix Thurs & F Event Hours: From: <u>Sat &amp; Sun</u> し		10 pm a.m./p.m.			

Sponsoring Organization Information
Name of Sponsoring Organization: Fox Valley United Way
Address of Sponsoring Organization: 44 E. Galena Blvd., Aurora, IL
Telephone #: (630) 896-4636
Contact Person: Denise Blettner
Contact Telephone #: (630) 362-4927
Email Address: denise. blettner Quw fox valley.org
Lindi Address. Gerrise. Sterilited Sover from the Company of the C
Property Information
Name of the Property Owner/Lessee/Proprietor/Operator or Manager for proposed event location:
Chicago Premium Outlets
Address: 1650 Premium Outlet Blvd.
Telephone #: Email:
reiephone #: Email:
Carnival Operation Information
Carnival Company Name: Windy City Amusements The
Carnival Company Name: Windy City Amusements Inc.
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St Charles, IL 60174
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St Charles, IL 60174  Business Telephone #: (630) 443-4547  Carnival Operator/Manager: Mark Salerno
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St Charles, IL 60174  Business Telephone #: (636) 443-4547
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St Charles, IL 60174  Business Telephone #: (630) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (630) 327-7156 Email: Windycity inc@ yahoo.com
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St. Charles, IL 60174  Business Telephone #: (630) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (630) 327-7156 Email: Windycity inc@ yahoo.com  Site Supervisor (if different from operator/manager):
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St Charles, IL 60174  Business Telephone #: (630) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (630) 327-7156 Email: Windycity inc@ yahoo.com
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St. Charles, IL 60174  Business Telephone #: (630) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (630) 327-7156 Email: Windycity inc@ yahoo.com  Site Supervisor (if different from operator/manager):
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St. Charles, IL 60174  Business Telephone #: (636) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (636) 327-7156 Email: Windycity inc@ yahoo.com  Site Supervisor (if different from operator/manager):  Telephone #: Email:  Names of owner(s), lessee(s) or proprietor(s) of carnival/circus:  Tony Salerno
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St. Charles, IL 60174  Business Telephone #: (636) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (636) 327-7156 Email: Windycity inc@ yahoo.com  Site Supervisor (if different from operator/manager):  Telephone #: Email:
Carnival Company Name: Windy City Amusements Inc.  Business Address: 914 W. Main St., St. Charles, IL 60174  Business Telephone #: (630) 443-4547  Carnival Operator/Manager: Mark Salerno  Telephone #: (630) 327-7156 Email: Windycity inc@ yahoo.com  Site Supervisor (if different from operator/manager):  Telephone #: Email:  Names of owner(s), lessee(s) or proprietor(s) of carnival/circus:  Tony Salerno

Site Information
Number of off-street parking spaces (select one): ☐ 1-15 ☐ 15-30 ☐ 30-50 ☑ 50 or more
Number of toilet facilities for patrons:
Will liquor be sold at the carnival/circus? Y N If yes, please submit a Temporary Liquor Permit Application (available on the City of Aurora website).
Will you be conducting a raffle at the carnival/circus? Y N If yes, please submit a Raffle Application (available on the City of Aurora website).
Employee Information
Do you maintain an accurate and comprehensive list of your carnival workers Y N
Do you conduct criminal background checks on potential employees (Y) N
Are any child sex offenders employed by the carnival/circus? Y (N)  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 conducted exclusively directed towards children.
Equipment Information
Do you maintain maintenance and repair records for the past eighteen (18) months Y N  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 Y N
2003 Caon nas nave with it the appropriate technical manuals and user s guider 1 //14
Operator Information
Have you had any accidents in the past five (5) years (Y) N
Are your procedures in compliance with Outdoor Amusement Business Organization Standards?
Are your procedures in compliance with U.S. Consumer Product Safety Commission Standards?
Are you in compliance with the Illinois Carnival & Amusement Rides Safety Act Y N

### **Insurance Requirements**

Applicant must submit a "Certificate of Insurance" with owner(s), lessee(s), proprietor(s), operator or manager of the carnival/circus, as well as those persons acting in a similar capacity with respect to each entertainment, performance or exhibit which make up the carnival/circus, 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 covering public liability and property damage and \$3,000,000 aggregate, such policy insuring liability that may arise from the operation or maintenance of the carnival/circus or any part therof.

#### **Restoration of Premises**

Applicant shall restore the premises to the same condition as premises existed prior to the operation of the carnival/cirucs, including or any part therof, trash, garbage and miscellaneous debris, and to insure the performance of this Article, the applicant shall submit, prior to approval of any application hereunder, a Performance Bond in the amount of not less than \$5,000 guaranteeing the restoration of the premises as provided herein with the City of Aurora as the obligee.

## **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 music festival, 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 music festival 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 to not violate any of the laws of the City of Aurora in the conduct of my place of business.

I also understand that an untrue, incorrect of misleading answer given in this application is sufficient cause for the refusal to grant or the revocation of any license 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.

Signature (owner/lessee/proprietor/manager)		Signature (owner/lessee/	Signature (owner/lessee/proprietor/manager)	
MARK	SALERNO			
Print/Type Name		Print/Type Name		

Notary Public

OFFICIAL SEAL CAROL WZARS NOTARY PUBLIC - STATE OF ILLINOIS MY COMMISSION EXPIRES:08/31/20