



City of Aurora
Special Event Permit Application



Date Received _____
Permit #18 _____

Special Event Permit – Form B –
Procession, March, Bicycle Race, Walk, Run

Applicant Information

Name of Event: Advocate Health Care Fox Valley Marathon

Organization: ShebBix Inc

Status: Unincorporated ___ 501c3 ___ 501c6 ___ Other

Applicant Name: Dave Sheble

Position within the Organization: President

Mailing Address (City, State, Zip): PO Box 3955 St Charles, IL. 60174

Work #: _____ Cell#: 630-240-9294 Email: dsheble@fv26.com

Description of the Event

Provide brief description here: Promote fitness, Fox Valley area, local charities & businsses. Detailed event overview, history and benefits to the communities, businesses and charities is attached

Event Date: 9/16/18 Event Start Time 7:00am Event End Time 12:30pm

Event Hours: 7-1pm Set-up Begins 6am Clean-up Ends 12:30pm

Event Site (attach route map): Route maps attached, same as past 6 years

Event Venue Address: 1st & Illinois, St Charles

Estimated Attendance: 1900 Past Attendance: 1900

Does the event have a Twitter, Instagram, Facebook or other Social Media networking page? Yes No ___

If yes, list URL(s): www.fv26.com

Number of years the event has been held: 8

Has the event applied for, or been approved for Neighborhood Festival Funding? Yes ___ No



City Services

The City of Aurora does not provide amenities such as portable restrooms, sound systems, radios, tables, chairs, tents, canopies or other equipment.

Security & Public Safety Plan

The Aurora Police Department will review the request and determine the necessary number of police personnel. Once the determination has been made Special Events will contact you with an approximate cost of services. APD will invoice within two weeks of the event.

Will you be providing additional private on-site security? Yes _____ No X _____

Security Company Name: _____

Security Company Contact: _____ Cell: _____

Where will security be needed? _____

Time security will be needed: _____

First Aid

Please indicate what arrangements you will make for providing first aid staffing and equipment during your event.

Emergency Medical Service Provider Name: Advocate Health Care. Medical plan is attached, same as previous years

If requesting Aurora Fire Department assistance the same procedure as above applies.

Phone Number: _____ Site Location: _____

Times of Operation: From _____ To _____

Public Property Refuse and Cleanup

Will you need additional trash bins? Yes _____ No X _____

If yes, number requested: Cardboard trash bins (\$6.50 ea.): _____ Liners (\$.50 ea.): _____
Contact Special Events at (630) 256-3370 for pick-up and payment.

How will you dispose of all trash generated? We carry everything out on our trucks
The City of Aurora does not dispose of trash.

If a dumpster is being ordered, provide contact and phone number of company delivering dumpster:

Where will dumpster be placed? _____

When will dumpster be delivered? _____



Recycling Rules

- No bottles will be permitted on city property
- The use of Styrofoam containers for food and beverage is prohibited at special events
- It is strongly encouraged to provide recycling containers at all events

Applicants are responsible for cleaning and restoring the site after the event. Please pick up all trash including paper, plastic, cans and event signage. The cost of any employee time incurred due to an applicant’s failure to clean and /or restore the site following the event will be borne by the applicant. If you reasonably believe that no litter will be generated during your event, please state this in your plan.

Public Property Cleanup

Will the event site need street sweepers prior to or after the event? Yes _____ No X

Specify: _____ Prior _____ Conclusion

Name of company providing street sweeper if other than the City:

If COA, a fee will be charged per the staffing chart.

Voice/Music Amplification

Will your event include musical entertainment? If yes, answer the following questions and attach schedule of any music or entertainment proposed to occur during the event. Yes _____ No x

If yes, indicate the number of stages, number of bands and type of music:

Number of stages: _____ Number of bands: _____ Type(s) of music: _____

If your event requires amplified sound please indicate times: Start Time: _____ End Time: _____

A Music Festival Permit through the City Clerk’s office is required for live music with attendance of more than 350 people.

Please note that the volume of the sound is required to be controlled as that it is not unreasonably loud, raucous, or disturbing to a reasonable person. An Aurora Police Officer may determine that noise during a permitted event is offensive to others and may require applicant to stop or turn down the volume. Also, APD may order musical entertainment to cease because it may incite a crowd to become unruly and risks injury.



Tents

If tents will be used for this event, please list sizes and types below:

Size: _____ Type: _____ Size: _____ Type: _____

Size: _____ Type: _____ Size: _____ Type: _____

Pavement Holes/Marring: Drilling into pavement (parking lots, streets, sidewalks, curbs, etc.) is strictly prohibited. All tents are required to be weighted down. Anchoring must be accomplished with weights, such as sandbags, concrete or water filled barrels.

Vendors

A vendor is anyone who is serving, selling, sampling or displaying food, beverages, merchandise or services.

Does the event include vendors: Yes _____ No X

An applicant having any food service must contact the appropriate Health Department for approval of any food preparation or service. All vendors must remove their own refuse and grease.

Does the event include food concession and/or cooking areas? Yes _____ No X

If yes, please fill out the Fire Prevention Operational Permit: <https://www.aurora-il.org/DocumentCenter/Home/View/425>

Fire Code requires a fire extinguisher at each cooking location.

Does the event include mechanical rides, moonwalks or other attractions? Yes _____ No X

If yes, company name? _____

List details, if any: _____

Applicants contracting with amusement ride companies are required to provide the City Aurora with a certificate of insurance naming the applicant and the City of Aurora as additional insured on general liability. The applicant must agree that any structures, which are to be place on the public right of way, shall not be situated or constructed so as to present any physical threat to pedestrians traversing the public right of way in the vicinity of said structures.

Portable Restrooms and Sinks

You are required to provide portable restrooms facilities at your event unless you can substantiate the sufficient availability of both ADA accessible and non-accessible facilities in the immediate area of the event site which will be available to the public during your event. The City of Aurora Special Events Division recommends on (1) portable toilet for every 250 people or portion thereof who attends your event. Ten percent (10%) of these facilities should be ADA accessible. This figure is based upon the maximum number of attendees at your event during peak time. The City of Aurora may determine the total number of required restroom facilities on a case-by-case basis.

If you plan to provide portable restrooms at your event, please indicated the number below:
Number of portable toilets: 2 Number of ADA accessible portable toilets: _____

If no, please explain: _____



Portable sinks are required at portable toilet locations if the event has four (4) or more food vendors. Otherwise all portable toilets must have hand sanitizers inside the units.

Restroom Company: Service Sanitation Phone: _____

Equipment Setup: Date/Time: 9/15/18

Equipment Pickup: Date/Time: 9/16/18

Crisis Management Plan

Name of Person responsible for notifying Emergency Services: Dave Sheble

Phone number: 630-240-9294 Contact Method: Cell

Method event staff and volunteers will use to communicate with each other: Contracted dedicated radio system

Electrical Plan

Will you require electrical service? Yes _____ No X
The City of Aurora does not provide generators or have access to 220 V.

Generator contact: _____

Sound contact: _____

Service required beyond that which is generally available must be provided and arranged for by the applicant. Restrictions may apply to specific sites. Generators CANNOT be refueled within the event site during the event operating hours.



Road Closures

Please provide a detailed route map/site plan for the event with this application.

Will the event require any road closures? Yes No

If yes, please fill in the following information:

Street Illinois St Bridge From 7:45am To 11:00am

Date _____ Times: From _____ To _____

Street _____ From _____ To _____

Date _____ Times: From _____ To _____

Street _____ From _____ To _____

Date _____ Times: From _____ To _____

Street _____ From _____ To _____

Date _____ Times: From _____ To _____

Street _____ From _____ To _____

Date _____ Times: From _____ To _____

Street _____ From _____ To _____

Date _____ Times: From _____ To _____

Street _____ From _____ To _____

Date _____ Times: From _____ To _____

*If deemed necessary the applicant must post "No Parking" signs along city roads where public parking spaces exist with the event site. The City requires that the event use City-owned signs that may be checked out from and returned to the City of Aurora Special Events Division within one week of check out date. If signage is lost stolen or damaged, the applicant will reimburse the City of Aurora \$5.00 per sign. The applicant will be fined \$100.00 if the signs are not taken down within 12 hours of the end of the event.

*Not applicable to all events.



Parking

Will parking considerations be needed? Yes _____ No X

Will you require street parking to be blocked off prior to the event? Yes _____ No X

If yes, type(s): Parking Lot _____ On Street Parking _____

Location(s): _____

Number of spaces: _____

Date: _____ Time: _____

Traffic Barricades

To provide for the safety of the participants and the public, barricades may be required.

Will you need barricades? Yes X No _____

Location of placement: Illinois St Bridge east and west sides as per map and APD

Amount needed: Aurora PD determination Date barricades needed: Aurora PD determination

Time of placement: 7:30am - 11:15am

Name of company providing barricades if other than the City: _____

Does the event restrict access to any private or public parking lots? Yes _____ No X

If yes, the applicant must provide a signed letter of consent from the private parking lot owners. This letter must be submitted to the Special Events Division before the Special Event Permit will be issued.

Resident and/or Business Notification

Events that require road closures, or may cause disruption for City of Aurora residents, businesses, churches, etc., must mail or hand deliver notification to the affected parties no later than 10 days prior to the event. Notices must reflect the date(s), day(s), times(s) and location(s) of the event, along with event details and the event coordinator's contact information. **Please provide a sample of the notice and a proposed list of recipients by geographical location with your application.**

Road closure notification verification: Date: _____ Method: _____



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TO SPECIAL EVENTS NO LATER THAN SIXTY (60) DAYS PRIOR TO THE OPENING DAY OF THE EVENT. A detailed site plan may be required. Late or incomplete applications may be denied. Mail application to **Special Events, City of Aurora, 44 East Downer Place, Aurora, IL. 60505** or email to events@aurora-il.org. *The contact will be notified to confirm receipt of application.* A copy of the application will then be forwarded to the appropriate committees for consideration of approval.

HOLD HARMLESS CLAUSE: The special events organizer hereby agrees to indemnify and hold harmless the City of Aurora, Illinois, its agents, public officials, officers, employees and authorized volunteers, from and against any and all legal actions, claims, damages, losses, expenses arising out of the permitted event/activity or any activity associated with the conduct of the organizer's operation of the event, including but not limited to, claims for personal or bodily injury, disease or death, or injury to or destruction of property, excluding claims caused by the willful commission or omission by employees of the City of Aurora acting within the scope of their employment. Further, the event organizer agrees to indemnify the City of Aurora and any of its agents, public officers, officials or employees and authorized volunteers for any attorney's fees and court costs incurred or to be incurred in defending any actions brought against them as a result of the organizer's use of public property or operation of the event as set forth in the application for special permit.

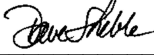
INSURANCE REQUIREMENTS: Proof of insurance is required of all Special Event organizers prior to the event. The attached list of insurance requirements should be reviewed immediately with your insurance agent to comply. Please provide document along with your completed application **14 days prior to event** to Special Events, City of Aurora, 44 East Downer Place, Aurora, IL. 60505 or email to events@aurora-il.org. Coverage shall be from reputable insurance companies in amounts acceptable to the City of Aurora. *Failure to provide said acceptable insurance coverage in a timely manner is grounds for non-issuance or revocation of the permit.*

PERMITTED USE OF PUBLIC PROPERTY: Whereas the Special Event Organizer agrees to use the public property at Illinois St Bridge in Aurora, Illinois, known as _____, for the staging of Advocate Health Care Fox Valley Marathon, the City of Aurora does hereby agree to permit for use, these premises for the date(s) of 9/16/18 through 9/16/18, 2018. Organizer does hereby agree to conduct only that business/activity which is described in the Special Event Permit Application, and agrees to all municipal requirements. Organizer further agrees that within thirty (30) days of the conclusion of the event it will, at its own expense, provide for the repair, replacement or maintenance of any damaged, lost or stolen portions of the subject property including, but not limited to landscaping, street or buildings and/or pavement.

LIABILITY WAIVER: The event organizer agrees for itself and/or its employees, agents, or volunteers associated or to be associated with the activity for which the permit is being sought, to waive and relinquish all claims that may result in any manner against the City of Aurora, its agents, public officers, officials or employees and authorized volunteers from said organized event or activity, except for acts caused by the willful and wanton misconduct by employees of the City of Aurora acting within the scope of their employment.

AUTHORIZED SIGNATURES: I hereby attest that I am authorized to bind the organization and/or its employees, agents, or volunteers associated or to be associated with the activity for which the permit is being sought, to the terms of this agreement. I have read and understand all regulations and requirements outlined herein. I/we do hereby agree to abide by all rules and regulations outlined herein. I/we hereby agree to meet all requirements for documentation, certification, licensing, financial responsibility and all other aspects of staging a Special Event in the City of Aurora, as outlined herein. ***I/we understand that our lack of meeting all requirements outlined herein may result in the denial or cancellation of the proposed Special Event.***

Permit applied for and all terms and stipulations agreed to by:

<u>Dave Sheble</u>	
Name (please print)	Signature
<u>President/Co-Race Director</u>	<u>2/21/18</u>
Signatory Title (if applicable)	Date