

**AURORA FIRE PREVENTION BUREAU**

**5 E Downer Pl. Suite G**

**AURORA, IL 60505**

**630-256-4130 FAX 630-256-4139**

www.aurora-il.org

Application for

Assembly Operational Permit

Section 105.6.4

Normal Use Special Event Carnival<sup>X</sup> Fair Circus Special Amusement

Circle Type

Event (Business) Name Westfield Fox Valley Mall Spring Carnival Date of Event May 5-8, 2016 & May 12-15, 2016  
Location of Event 195 Fox Valley Center Aurora, IL Hours: Thurs: 6-10PM; Fri: 6-11P; Sat: 2-11P; Sun: 2-10PM  
Applicant's Name Fantasy Amusement Co., Inc. Phone # 847-259-9090  
Contact email fac9090@comcast.net

Address 629 N. Forrest Ave. Arlington Heights, IL 60004

**Class of Assembly (check all that apply)**

Above Grade  Below Grade  At Grade  Outside  Tent  over600  over1000

Occupant load:  Posted Y  N  Fire Extinguishers present: Y  N  How Many

Kitchen present Y  N  Class of Liquor License: N/A No smoking signs posted N/A  Y  N

Fire Alarm Y  N  Sprinkler System Y  N  Hood System Y  N

Live entertainment NA  Y  N  Sometimes  How Often?

Type: Band  DJ  Other (explain)  Stage: None  Temporary  Permanent

Will you use a smoke machine? Y  N  Will you use Pyrotechnic Displays? Y  N

Method to determine number of occupants present: Describe

Ticket sales at Door  Presales  Both  Provide ticket manifest

Size of tent N/A Number of exits  (attach separate sheet for additional tents)

Electric exit signs Y  N  Emergency light Y  N

How is Electrical power being supplied? Generator

**Documents required for all Assembly Uses\* (attach copy)**

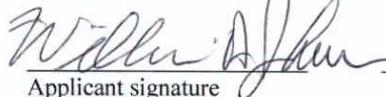
- Provide site plan (indicate lot lines, parking, tents, building, streets and vendors)
- Provide information on Emergency Evacuation plan and Fire Safety Plan\*\*
- Seating Plan (Provide copy)
- Crowd control managers name (1 per 250 Occupants (attach list of names) and certificate  
For class go to: <http://www.firemarshal.state.md.us/crowdmanager/>
- Attach letter from property owner for use of land

\*(All requests for drawings may be on one plan as long as it is clear)

**Presence of police required: Y  N**

Contact Aurora Police Department (630) 256-5000 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

1/15/2016

Applicant signature

Print Name

Date

**PERMIT MUST BE SUBMITTED TWO WEEKS PRIOR TO EVENT**

Office Use

Date received  Site Plan  Evacuation Plan  Occupant Load  Site visit

Permit approved  Disapproved