

**AURORA FIRE PREVENTION BUREAU**  
**5 E. DOWNER PL. SUITE G**  
**AURORA, IL 60505**  
630-256-4130 / FAX 630-256-4139 / [www.fpb@aurora-il.org](http://www.fpb@aurora-il.org)

**Application for Assembly Operational Permit**  
**(Section 105.6.4)**

Normal Use    Special Event    Carnival    Fair    Circus    Special Amusement  
Circle type

Event (Business) Name Windy City Amusements Inc.    Date(s) of Event Oct 16-18, 2015  
Location of Event Northgate 886-954 N. Lake St.    Hours: Fri 5-10 Sat 1-10 Sun 1-8pm  
Applicant's Name Mark Salerno    Phone # (630) 443-4547  
Address 914 W. Main St. St. Charles IL 60174  
Cell # (630) 327-7156    Fax # (630) 443-4548    E-mail Address: Office@windycityamusements.com

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

Above Grade  Below Grade  At Grade  Outside  Tent(s)   
Over 600  Over 1,000  Occupant load: N/A Posted? Y  N   
Fire Extinguishers present: Y  N  How many? 12+  
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 System? Y  N   
Live entertainment? NA  Y  N  Sometimes  How Often?   
Type: Band  DJ  Other (explain)   
Stage: None  Temporary  Permanent   
Will you be using a smoke machine? Y  N  Will you be using pyrotechnic displays? Y  N   
Method to determine number of occupants present: Describe N/A

Ticket sales: At door  Pre-sales  Both  Provide copy of ticket manifest.

**Will a tent be used?** Y  N  (separate building permit is required)

Size of tent \_\_\_\_\_ Number of exits \_\_\_\_\_ (attach separate sheet for additional tents)  
Electric exit signs Y  N  Emergency light Y  N   
How is Electrical power being supplied? Generators

**NOTICE: No smoking, no combustible (hay straw and like materials) and no open flames allowed inside a tent or within twenty (20) feet of the tent.**

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

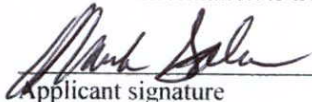
- Provide site plan (indicate lot lines, parking, tents, building, streets and vendors)
- Provide information on Emergency Evacuation plan and Fire Safety Plan\*\*
- Seating Plan (provide copy)
- Crowd control manager(s)' names (1 manager per 250 occupants required. Provide list of names)
- Attach letter 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 Officers required:** Y  N

Contact Aurora Police Department at (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.

  
Applicant signature

Mark Salerno  
Print Name

5/12/15  
Date

**Permit must be submitted two weeks prior to event**

Office Use Only

Date received \_\_\_\_\_ Site Plan  Evacuation Plan  Occupant Load \_\_\_\_\_ Site visit \_\_\_\_\_

Permit: Approved \_\_\_\_\_ Disapproved \_\_\_\_\_ Date \_\_\_\_\_