

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 Fair Circus Special Amusement

Circle Type

Event (Business) Name Roots Aurora Date of Event Sep 26th
Location of Event LaSalle Street Auto Row Hours: 4pm-8pm
Applicant's Name Julian Sturges Vargas Phone # 630 317 7031
Contact email vargas.julian@nmn@gmail.com
Address 550 Second Ave 60505

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: ___ 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 Center @ entrance
Ticket sales at Door ___ Presales ___ Both ___ Provide ticket manifest
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

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.

Julian Sturges Vargas Applicant signature Julian Sturges Vargas Print Name 6/20/2015 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 ___