



**CITY CLERK'S OFFICE
304 SOUTH INDIANA AVENUE
KANKAKEE, ILLINOIS 60901
PHONE 815-933-0480
FAX 815-933-0482**

APPLICATION FOR SPECIAL EVENT PERMIT

INSTRUCTIONS FOR COMPLETING THE SPECIAL EVENT PERMIT APPLICATION

This form must be completed to receive permission for the following: to have a parade/march/run/rally or tag day on City property; to close a street within the City; to request the use of amplified sound; or to request permission by a business to block a city sidewalk for a sidewalk sale.

THE FOLLOWING CONDITIONS MUST BE MET BEFORE A REQUEST SHALL BE GRANTED:

- ❖ **In no event shall any noise permit allow for sound to be amplified past 11:00 P.M. Sunday through Thursday nights, and 12:00 A.M. for Friday and Saturday nights.**
- ❖ **Persons requesting a noise permit for a business must either: (1) submit proof that such person is the true owner of the business; or (2) submit a notarized letter from the owner acknowledging permission for said request.**
- ❖ **Parades, rallies, public demonstrations, or tag days require proof of insurance with a minimum of \$1,000,000.00 liability coverage to be submitted to the City Clerk's office prior to the date of the event. Tag days also require satisfactory proof that the organization soliciting contributions is a charitable organization.**
- ❖ **Sidewalk sales are limited to one three (3) consecutive day sale per six-month calendar period per business location, during regular business hours.**
- ❖ **All applications and attached documentation must be submitted to the City Clerk's office by the Thursday prior to the Council date preceding the event.**

****Careful completion of the form will help to avoid delays in processing. It is important that you follow the instructions and provide clear and accurate information. Submit all necessary documents with this application. You will be notified by letter if the event has been approved. Do not assume that all aspects of the event will be approved; you may be asked to make some changes to your plan based on the availability of services and scheduling of other events. Therefore, you are encouraged not to make any other arrangements for your event until approval from the City Council has been received****

PLEASE CHECK APPROPRIATE BOX:

PARADE/MARCH/RUN/RALLY/PUBLIC DEMONSTRATION TAG DAY STREET CLOSURE

NOISE PERMIT SIDEWALK SALE OTHER (PLEASE SPECIFY): _____

TODAY'S DATE: _____

(PLEASE PRINT)

SPONSORING ORGANIZATION OR INDIVIDUAL FOR EVENT: _____

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

HOME PHONE: _____ CELL PHONE: _____

EVENT NAME: _____

EVENT ADDRESS: _____

EVENT DATE & START & END TIME: _____

RAIN DATE (IF ANY): _____

TO CLOSE A STREET:

STREET(S) TO BE CLOSED, INCLUDING INTERSECTING ROADWAYS: _____

WHAT HOURS ARE YOU REQUESTING FOR STREET CLOSURE? _____

THE UNDERSIGNED REPRESENTS THE PARTICIPANTS IN SAID EVENT AND AGREES TO THE CONDITIONS OF THE APPLICATION:

SIGNED: _____

Office Use Only:	
Proof of insurance submitted?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Proof of charitable organization?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Permission letter (noise permit)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Processed by: _____	
Date/Time: _____	
<input type="checkbox"/> Approved <input type="checkbox"/> Denied	
If Denied Reason for Denial: _____	
