

# Special Event Request, City of Plano, Illinois

(Check all that apply)

- Parade
- Fair/Festival
- Run/Walk
- Ride

- March/Public Assembly
- Expo
- Other \_\_\_\_\_

Name of sponsoring organization(s) \_\_\_\_\_

Not-for-profit Organization ID # \_\_\_\_\_

Date of event \_\_\_\_\_ Start time \_\_\_\_\_ End time \_\_\_\_\_

Set Up Date and/or Times \_\_\_\_\_

### Name of person(s) responsible for organizing and conducting event:

Name	Address	Phone	Email	Title

Number of people (\_\_\_\_\_) animals (\_\_\_\_\_) Vehicles (\_\_\_\_\_) expected to participate. See \* Page 2.

Describe the event in detail:

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Are you requesting streets to be closed? If so, list specifics and provide notation on any event route.

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Does this event require blockage of Route 34? Yes \_\_\_\_\_ No \_\_\_\_\_

(If yes, this will require approval from the Illinois Department of Transportation).

**Are you requesting assistance from the City of Plano and/or Plano Police?**

- **Barricades?**
- **Emergency services**
- **Police presence for traffic or crowd control?**
- **Water**
- **Electricity**
- **Waste services**

Please Describe:

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Proof of insurance submitted Yes \_\_\_\_ No \_\_\_\_

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Signature of person making application \_\_\_\_\_ /Printed Name/Title

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Address \_\_\_\_\_

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Telephone \_\_\_\_\_ Email address \_\_\_\_\_

**Signatures needed:**

Police Chief: \_\_\_\_\_

Fire Chief: \_\_\_\_\_

Director of Building ,Planning, & Zoning \_\_\_\_\_

Street Superintendent: \_\_\_\_\_

City Administrator: \_\_\_\_\_

Mayor: \_\_\_\_\_

**Necessary Attachments to this application:**

- **Event Map**
- **Insurance Certificate**

If City roads are going to be blocked off for your Special Event you must inform the businesses/neighbors that will be affected 2 weeks prior to the event and they need to sign this form. You need to return this signed form to the City for our records.

Thanks  
Special Events Committee

Date _____	Business Name _____	Owner/Manager _____
Date _____	Business Name _____	Owner/Manager _____
Date _____	Business Name _____	Owner/Manager _____
Date _____	Business Name _____	Owner/Manager _____
Date _____	Business Name _____	Owner/Manager _____
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