



Application for Special Use Permit

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ph: (815) 622-6200 | fax: (815) 622-6210

to be accepted your application with the required site plan must be completed and signed. Type or print information clearly and attach maps, layouts and additional information. Please use US mail or email to submit your application.

1. APPLICANT INFORMATION

Organization/Individual			
Mailing Address		Street Address	
		City, State Zip	
Applicant Contact:		Name:	Secondary Contact
		Title:	Name
Phone:		Cell:	Phone:
Cell:		Cell:	
Email:		Email:	
Organization/Activity Website:			
Is Sponsoring Organization a 501(c)(3)? Yes <input type="checkbox"/> No <input type="checkbox"/>			

2. ACTIVITY INFORMATION

Activity Name:							
Park(s) Requested:							
Event Dates: Indicate Date/Times OPEN to attendees				Hours: Open until Closing Each Day		Expected Daily Attendance:	
						Participants	Volunteers
Day 1	Day:	Date:	Start Time:	End Time:			
Day 2	Day:	Date:	Start Time:	End Time:			
Day 3	Day:	Date:	Start Time:	End Time:			
Day 4	Day:	Date:	Start Time:	End Time:			
Day 5	Day:	Date:	Start Time:	End Time:			
Day 6	Day:	Date:	Start Time:	End Time:			
Day 7	Day:	Date:	Start Time:	End Time:			
Activity Setup Starts:			Activity Take Down Complete:			Total Attendance: (Add all rows and columns)	
Start Day/Date:	Start Time:	End Day/Date:	End Time:				

3. ACTIVITY DETAILS

Activity Type:	
Is this activity public? Yes <input type="checkbox"/> No <input type="checkbox"/>	Please check all methods by which the activity is advertised: <input type="checkbox"/> TV <input type="checkbox"/> Radio <input type="checkbox"/> Online <input type="checkbox"/> Billboards <input type="checkbox"/> Posters <input type="checkbox"/> Advance Ticket Sales Other:
Activity Purpose/Description:	

4. SITE PLAN

Required:	Applications will not be accepted without a site plan. You must attach a clear and legible site plan or map with the following indicated: <ol style="list-style-type: none">1. NORTH, indicated by a directional arrow symbol2. Name of park3. The overall Activity Area (include parking if appropriate) inside the park4. The location of all physical equipment being used5. Any other details you think are helpful6. Electrical plan if applicable
Activity Set up:	Describe the logistics and set up of your activity. Attach additional documents if necessary:

5. FEES & PROCEEDS	Admission/Participation Fee? Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount? \$
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6. AMPLIFIED SOUND/MUSIC	Does your activity have any amplified sound? Yes <input type="checkbox"/> No <input type="checkbox"/>	What times are you requesting amplified sound? Start: _____ End: _____	Is electricity required? Yes <input type="checkbox"/> No <input type="checkbox"/>
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7. INSURANCE	Evidence of insurance must be provided to the Sterling Park District no later than thirty (30) days prior to the commencement of the event. Park Use Permits will not be issued until all insurance requirements have been received, verified and approved. Insurance requirements will be made available at time of permit request.
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8. PAYMENT <i>Completed by Park District</i>	Deposit Required Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount: \$	Paid Yes <input type="checkbox"/> No <input type="checkbox"/>
	Permit Fee Required Yes <input type="checkbox"/> No <input type="checkbox"/>	Amount: \$	Paid Yes <input type="checkbox"/> No <input type="checkbox"/>

9. SIGNATURE	I certify that the information that I have provided on this application is true and accurate to the best of my knowledge. If the activity plans change, I will submit a revised application or additional information accordingly. All information contained in the application is subject to public disclosure.
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Applicant Signature	Date	Applicant Printed Name
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10. APPROVAL/DENIAL <i>Completed by Park District</i>	Date Received	Approved <input type="checkbox"/> Denied <input type="checkbox"/>	Reason for Denial:
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Park District's Signature	Date	Print Name
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