



A PLACE TO DISCOVER™

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<http://www.villageofwinfield.com>

PERMITTED TEMPORARY USE APPLICATION

DATE OF APPLICATION: _____

GROUP NAME: _____

NAME OF EVENT: _____ PHONE: _____

BUSINESS ADDRESS: _____

GROUP REPRESENTATIVE: _____ PHONE: _____

EMAIL ADDRESS: _____

GROUP REPRESENTATIVE ADDRESS: _____

DATE(S) OF EVENT: _____

TIME EVENT WILL BE HELD: FROM _____ TO _____

LOCATION(S) OF EVENT: _____

DESCRIBE EVENT: _____

(ATTACH COPY OF EVENT SITE PLAN AND/OR MAP OF ROUTE)

PLEASE PROVIDE A CERTIFICATE OF INSURANCE WITH MINIMUM LIABILITY LIMITS OF \$1,000,000 NAMING THE VILLAGE OF WINFIELD AS ADDITIONAL INSURED FOR THIS EVENT.

YES NO

- 1. ARE YOU REQUESTING TO SELL ALCOHOL? _____
- 2. ARE YOU REQUESTING TO SELL FOOD? _____
- 3. ARE YOU REQUESTING OUTDOOR RETAIL SALES? _____
- 4. ARE YOU REQUESTING TO OFFER CARNIVAL RIDES? _____

(IF YOU ANSWERED YES TO ANY OF THE ABOVE QUESTIONS, DESCRIBE IN MORE DETAIL ON A SEPARATE SHEET OF PAPER)

APPROVED: _____ DATE: _____
Village Manager

APPROVED: _____ DATE: _____
Police Department

Public Works Department _____