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SPECIAL EVENT APPLICATION

FOR (OFFICE USE ONLY
	Site Plan
	Raffle Application
	Temp. Liquor License App.
	Event Application
	Property Owner Permission
	Insurance Certificate

VILLAGE OF LONG GROVE

Please complete this form in its entirety. This application must be submitted a minimum of $\underline{90}$ days prior to the event.

Applications should be mailed, faxed or e-mailed to the Village of Long Grove:

Sherry Shlagman Village of Long Grove 3110 RFD Long Grove, IL 60047 847-634-9440 Fax: 847-634-9408 sshlagman@longgrove.net

Submittal Date: 1/23/2020 Date	Received:
EVENT INFORMATION	
Event Name & Location(s): Long Grove Craft Beer F	est
Description/Type of Event: Beer and Wine tasting ev	ent
Event Date: Sat., 4/25/2020	Hours: 12pm-5pm
Set Up for Event	Dismantling of Event
Date Fri., 4/24/2020	Date: Mon., 4/27/2020
Hours: 12pm to 8m	Hours: 8am to 3pm
Estimated Number of Attendees: 700	Estimated Number of Vendors: 25
Sponsoring Organization: Historic Downtown Long G Street Address: 308 Old McHenry Road	Grove
City: Long Grove State :IL Zip Code: 60047	
Phone Number: 847-634-0888	Fax Number:
Contact Person: Mike Marr	Phone Number: 312-933-1419

E-mail Address: mike@buffalocreekbrewing.com

Additional Information

Include with this application the following:

- 1. A <u>site plan</u> of all areas of the B-1 District covered by the event. On the plan, mark the sanitary facilities and auxiliary parking lots (if applicable).
- 2. Written permission from property owners
- 3. Certificate of insurance naming **both** Historic Downtown Long Grove Business Association and Village of Long Grove as additionally insured.
- 4. Indicate the requested areas of the roadway and parking that will need to be closed and barricaded for this event if it applies.
- 5. Provide the number of security and police officers needed and the times for each (if required per approval) (Cost for security: \$70/hour per deputy. Payment must be submitted with application):

	A. 8	Security officers	NA	Hours		_ to
	B. 1	Traffic officers	NA H	lours	_ to	
	C. F	Parking Assistants	NA	Hours		to
		whether there will be ordering banners or ten			llage Pla	nner – 847-634-9440)
		Banners	x Yes	□ No, Farr	nstand I	building and on the tents
		Temporary Signs Other (specify)		□ No, park	king dire	ctional signs
		nswered yes provide) where these items			e posted	and written permission of
7.	Indicate	promotional materia	ils and adve	ertising to be used	l (check	all that apply):
		lewspapers	☐ Cable	T.V.		nternet
	X en	nail Newsletters	☐ Com	mercial T.V.		Radio
		irect Mailings		e Magazines		social media/ website
		provide specifics as t , music, etc.	to the use o	f any mechanical	or elect	ronic rides, demonstration

9. Services provided at event:

Live music

Service	Contact Name	Company	Address	Phone Number
Sanitation/Portable Restrooms		Royal Flush	Wasco, IL	888-358-7404
Waste Disposal/Garbage		Flood Brothers	Oak Brook Terrace	(773) 626-5800
Tents				
Music				
Other				

- 10. Provide a list of all vendors and their Illinois sales tax identification number. Provide each vendor with notice or form indicating they are filing all sales occurring in the Village of Long Grove. Sales tax rate for the Village of Long Grove is 8%. Food vendors should contact the Lake County Department of Health (847-360-6700) to apply for a permit.
- 11. If there is a charity involved or benefiting from this event, please provide the name of the charity, contact name and a phone number.
- 12. Raffle Submit "Application for License to Conduct Raffle." Raffle must be approved by the Village Board prior to the event.*
- 13. Liquor Submit "Temporary Liquor License" Application. Please note that a State of Illinois Liquor License is also required. Applications may be downloaded at www.illinois.gov/license.cfm.*

* For additional copies of the Event Application or to obtain an Application for License to Conduct Raffle, or Temporary Liquor License Application please visit the Village of Long Grove website at http://www.longgroveil.gov. Applications can be found under the heading "Forms" on the home page.

All the information submitted is as part of an application to the Historic Downtown Long Grove Business Association to obtain their recommendation to the Village Board to hold a specific event in the B-1 Historic Business District. The event date is for the upcoming year and all of the information is accurate to the best of my knowledge.

Please read this form carefully and be aware that in signing up and participating in this event you will be waiving and releasing all claims arising out of this program. In consideration of the Village sponsoring and providing the above event and accepting me as a participant in the above event, I agree as follows:

ACKNOWLEDGEMENT/ASSUMPTION OF RISK OF INJURY

I have fully informed myself of all the details of the LGBCP event(s) and the risks inherent in the event. I recognize and acknowledge that they may involve risks of bodily injury and death. I agree to and assume the full risk of any injuries, including death, and of all costs, damages, and losses that I may sustain as a result of participating in any and all activities connected with or associated with such event.

WAIVER AND RELEASE OF CLAIMS FOR INJURY

I hereby agree to, and do waive, release and relinquish all claims of every kind, known and unknown, present and future, that I may have against the Village of Long Grove, the Historic Downtown Long Grove Business Association and their officers, agents, servants and employees, arising out of, connected with, or in any way related to, the event or my participation therein.

INDEMNITY AND DEFENSE

I hereby further agree to indemnify and hold harmless and defend the Village of Long Grove, Historic Downtown Long Grove Business Association and their officers, agents, servants and employees from any and all claims of every kind, known and unknown, present and future, that I may have arising out of, connected with, or in any way related to the program or my participation therein. My signature also allows the use my photo for promotional purposes. My signature on this form indicates that I have read and understand the above Waiver and execute it of my own free will and without any reservation.

Modufflus /-23-2020
Signature of Applicant Date



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS 01/16/2020 CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). PRODUCER CONTACT NAME: Michelle Wolff Cook and Kocher Insurance Group PHONE (A/C. No. Ext): E-MAIL (847) 692-9200 300 S. Northwest Highway FAX (A/C, No): (847) 692-9299 michellew@cookandkocher.com Suite 208 ADDRESS: Park Ridge INSURER(S) AFFORDING COVERAGE IL 60068 NAIC# Hanover Insurance Company INSURER A: INSURED 22292 Twin City Fire Insurance Co. INSURER B: HISTORIC DOWNTOWN LONG GROVE 29459 Lloyd's of London INSURER C: **BUSINESS ASSOCIATION** INSURER D: 308 OLD MCHENRY ROAD INSURER E : LONG GROVE IL 80047 COVERAGES INSURER F: CERTIFICATE NUMBER: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD CL1962804548 INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. INSF LTR ADDL SUBR INSD WVD TYPE OF INSURANCE POLICY NUMBER COMMERCIAL GENERAL LIABILITY CLAIMS-MADE CCCUR EACH OCCURRENCE DAMAGE TO RENTED 1,000,000 300,000 Α 5.000 Y MED EXP (Any one person) OHCA986545 07/15/2019 07/15/2020 GENTLAGGREGATE LIMIT APPLIES PER: PERSONAL & ADV INJURY 1,000,000 POLICY 2,000,000 **GENERAL AGGREGATE** OTHER: PRODUCTS - COMPIOP AGG 2,000,000 s AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT (Ea accident) ANY ALTO s 1,000,000 OWNED Α SCHEDULED BODILY INJURY (Per person) S AUTOS ONLY OHCA988545 AUTOS NON-OWNED 07/15/2019 07/15/2020 **BODILY INJURY (Per accident)** s AUTOS ONLY AUTOS ONLY PROPERTY DAMAGE \$ UMBRELLA LIAB OCCUR A **EXCESS LIAB** 4 000 000 EACH OCCURRENCE CLAIMS-MADE OHCA986545 07/15/2019 07/15/2020 RETENTION S AGGREGATE 4,000,000 DED WORKERS COMPENSATION AND EMPLOYERS' LIABILITY X PER STATUTE ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) B N/A 83WECBO9102 01/01/2019 500,000 01/01/2020 E.L. EACH ACCIDENT if yas, describe under DESCRIPTION OF OPERATIONS below 500 000 E.L. DISEASE - EA EMPLOYEE 500,000 E.L. DISEASE - POLICY LIMIT Liquor Liability C LIQ101504.09 04/30/2019 04/30/2020 1,000,000 DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required) Festival of culture: April 25, 2020 August 1, 2, 2020 September 4, 5, 6, 7, 2020 CERTIFICATE HOLDER CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN Illinois Liquor Control Commission ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE



Village President

Bill Jacob, Chair Administration & Legislation

January 15, 2020

Trustees

Anne Kritzmire, Chair Finance & Communications

Chris Borawski Security, Sustainability

Jennifer Michaud

Chuck Nora, Chair Building, Water & Sewer

Rita O'Connor, Chair Roads, Bridges & Pathways

Bobbie O'Reilly, Chair Economic Development & Environmental Concerns

> Village Clerk Amy Johns Gayton

Village Administration

David Lothspeich Village Manager dlothspeich@longgroveil.gov

> James M. Hogue Village Planner jhogue@longgroveil.gov

Margerita Romanello Building Commissioner mromanello@longgroveil.gov

Sherry Shlagman Administrative Assistant sshlagman@longgroveil.gov

> Julie Bauer Receptionist jbauer@longgroveil.gov

Denise Rosenquist

Administrative Intern
drosenquist@longgroveil.gov

Illinois Liquor Control Commission 100 W. Randolph St., #7-801 Chicago, IL 60601

> RE: The Village of Long Grove Liquor Commissioner Approval Special Event Applications Historic Downtown Long Grove EIN #20-3818886

Dear Illinois Liquor Control Commission:

As the Liquor Commissioner for the Village of Long Grove, I hereby grant approval and the license to the Historic Downtown Long Grove to oversee sponsors and vendors of, and to serve beer, wine and pre-approved, pre-mixed liquor drinks at the outdoor events listed below in 2020. We have received proof of liquor liability insurance and our Village Board has approved the dates for these festivals on the 2020 calendar:

Long Grove Festival of Culture

April 25, 2020 August 1, 2, 2020 September 4, 5, 6, 7, 2020

This letter serves as the Local Authority Approval required to submit the Application for State of Illinois Special Event Liquor License.

Signed

Bill Jacob

Village President Liquor Commissioner



To Whom It May Concern:

Historic Downtown Long Grove has applied for an Illinois Liquor License and will submit as soon as we receive. It was mailed Wed., 1/22/2020.

2020 Craft Beer Fest Map

