

Office of the City Clerk 100 East Broadway Monmouth, IL 61462 (309) 734-2141

SPECIAL EVENT LICENSE APPLICATION

Organizer Information Name: Address: Contact/Manager: Contact/Manager's Address: Phone: Email: If the organizer is a Merchant's Association, please list the participating businesses: **Event Information Event Name:** Type of Event: Event Date(s): Setup Time: _____ Tear Down Time: Event Start Time: _____ Event End Time: Estimated staff/volunteers: _____ Estimated attendees: Will food be served? Circle YES or NO. Prepared on site? Circle YES or NO. If applicable, please list the food vendors (attach an additional sheet if necessary): If there will be amplified entertainment at the event, please describe:

Please list the vendors who will be selling, serving or distributing alcoholic beverages at this event:	
Application Checklist	
\$50 application fee.	
\$250 license fee for non-Merchant	t's Association.
improvements (sidewalks, light pogrates) in the immediate area, and size of all proposed signs and bank	he special event area and all public osts, benches, planters, trees and tree a showing the location and approximate ners advertising alcoholic beverages, orary toilets (if needed), entertainment nees and exits to the special event.
Written proposal to provide secure	e access to the event.
Proof of general liability insurance	e for the event.
Copies of any Special Event liquor insurance for the event.	licenses and event-specific dram
Signature of organization's manager:	Date:
For Office Use Only	
Date application received:	
Plan approved by Police Chief:	
Plan approved by City Council:	
City Clerk:	