

Permit #

SKIPPED

*** BUSINESS OR ORGANIZATION NAME**

Cirque Entertainment III, LLC / Paranormal Cirque

*** BUSINESS OR ORGANIZATION NAME ADDRESS**

2903 9th St W
Bradenton FL 34205

*** PHONE #**

(941) 539-3596

*** EMAIL**

rosa@cirqueitalia.com

*** CONTACT PERSON**

Manuel Rebecchi

*** CONTACT PERSON ADDRESS**

2903 9th St W
Bradenton FL 34205

*** PHONE #**

(941) 539-3596

*** EMAIL**

rosa@cirqueitalia.com

*** CHAIRPERSON OF SPECIAL EVENT**

Manuel Rebecchi

*** CHAIRPERSON ADDRESS**

2903 9th St W
Bradenton FL 34205

*** PHONE #**

(941) 539-3596

*** EMAIL**

rosa@cirqueitalia.com

*** EVENT DAY CONTACT PERSON**

Manuel Rebecchi

*** EVENT DAY CONTACT PERSON ADDRESS**

2903 9th St W
Bradenton FL 34205

*** PHONE #**

(941) 539-3596

*** EVENT DAY CONTACT PERSON EMAIL**

rosa@cirqueitalia.com

*** LOCATION AND ADDRESS OF EVENT**

Orland Square - 288 Orland Square Dr. Orland Park, IL 60462

*** TYPE OF EVENT:**

Circus - Temporary Acrobatic Theatrical Cirque Style Circus show under a tent

*** EVENT ON PUBLIC PROPERTY**

MOVING EVENT

*** EVENT ON PRIVATE PROPERTY**

OUTDOOR EVENT

COMMERCIAL FILMING/PICTURES

NON-COMMERCIAL FILMING/PICTURES ON PUBLIC PROPERTY

*** DESCRIPTION OF EVENT**

Temporary Acrobatic Theatrical Cirque Style Circus Show No Animals, No Open Fires, No Pyro, No Alcohol, No Rides, No Games, No Parades, No Street Closures.

*** LIST DATES OF EVENT WITH HOURS OF OPERATION**

July 25 - July 28, 2025 Mon - Fri 6pm - 10:30pm / Sat & Sun 12pm - 10:30pm

*** SET-UP DATE & TIME**

07/22/2025 8:00 AM

*** TEAR-DOWN DATE & TIME**

07/29/2025 11:00 PM

*** APPROXIMATE NUMBER OF PERSONS INVITED AND/OR EXPECTED TO ATTEND OR PARTICIPATE**

300 - 400 per show

(Additional Fees May Apply)

*** WILL FOOD BE SERVED?**

YES

*** WILL YOUR EVENT INCLUDE A FOOD TRUCK? (Food being prepared and served from the vehicle)**

NO

*** WILL ALCOHOL BE SERVED? (If YES, contact Mayor's Office at 708-403-6160 and complete the "Application for Temporary Liquor License.")**

NO

PHONE #

SKIPPED

EMAIL

SKIPPED

*** WILL GENERATORS BE UTILIZED?**

YES

If YES, please describe the size/type:

See Attached

*** WILL THERE BE A RAFFLE? (Contact Village Clerk at 708-403-6150)**

NO

PHONE #

SKIPPED

EMAIL

SKIPPED

*** WILL THERE BE LIVE ENTERTAINMENT? (Music must end by 10:30PM Sun-Th, 11:30PM Fri-Sat)**

YES

*** WILL THERE BE TEMPORARY SIGNAGE? (Banners, Inflatables, Etc.)**

NO

*** WILL THERE BE A TENT?**

YES

*** WILL THERE BE ANY STRUCTURES OTHER THAN A TENT? (Stage, Etc.)**

NO

If YES, list structures:

SKIPPED

*** WILL THERE BE ANY ROAD OR SIDEWALK OR RIGHT-OF-WAY CLOSURES?**

NO

*** WILL THE EVENT BEGIN AT ONE LOCATION AND TERMINATE AT ANOTHER?**

NO

If YES, complete the questions below. If NO, sign and date to complete application.

1. The route to be traveled, the starting point, the termination point, and the location of any stopping point, speakers' platforms, or similar, if any. (A. Provide Map, B. Google Aerial Image with route traced is OK.)

****SKIPPED****

Attachment

****SKIPPED****

2. The approximate number of persons who, and animals and vehicles which, will constitute the event, types of animals, and description of the vehicles.

No Animals, No Open Fires, No Pyro, No Alcohol, No Rides, No Games, No Parades, No Street Closures.

3. The hours when the event will start and terminate.

Mon - Fri 6pm - 10:30pm / Sat & Sun 12pm - 10:30pm

4. Please provide a statement as to whether the event will occupy all or a portion of the width of the streets proposed to be traversed.

The event will be set up on the mall parking lot (Not a Public Street)

5. The location of any assembly areas for the event.

N/A

6. The time and location at which units of the event will begin to assemble at any such assembly area or areas.

N/A

Please attach the above information if your event falls into the applicable category.

*** APPLICANT NAME**

Cirque Entertainment III, LLC Manuel Rebecchi

*** DATE**

06/24/2025

* I attest that the information provided above is to the best of my knowledge accurate. I understand that by checking this box and providing my name and date above, this also acts as my signature.

Checking this box also acts as my signature.



NEW SUBMISSION* Special Event Permit Application

message

Village of Orland Park, IL <communications@orlandpark.org>
o: rosa@cirqueitalia.com

Tue, Jun 24, 2025 at 7:55 F

Special Event Permit Application

Submission #: 4141713
IP Address: 35.143.109.46
Submission Date: 06/24/2025 6:55 PM
Survey Time: 15 minutes, 43 seconds

You have a new online form submission.

Note: all answers displaying "*****" are marked as sensitive and can be viewed after you login.

Permit

BUSINESS OR ORGANIZATION NAME

Cirque Entertainment III, LLC / Paranormal Cirque

BUSINESS OR ORGANIZATION NAME ADDRESS

2903 9th St W
Bradenton, FL 34205

PHONE

(941) 539-3596

EMAIL

rosa@cirqueitalia.com

CONTACT PERSON

Manuel Rebecchi

CONTACT PERSON ADDRESS

2903 9th St W
Bradenton, FL 34205

PHONE

(941) 539-3596

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rosa@cirqueitalia.com

CHAIRPERSON OF SPECIAL EVENT

Manuel Rebecchi

CHAIRPERSON ADDRESS

Bradenton,FL 34205

PHONE #

(941) 539-3596

EMAIL

rosa@cirqueitalia.com

EVENT DAY CONTACT PERSON

Manuel Rebecchi

EVENT DAY CONTACT PERSON ADDRESS

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Bradenton,FL 34205

PHONE #

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LOCATION AND ADDRESS OF EVENT

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COMMERCIAL FILMING/PICTURES

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300 - 400 per show

(Additional Fees May Apply)

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YES

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NO

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NO

PHONE #

EMAIL

WILL GENERATORS BE UTILIZED?

YES

If YES, please describe the size/type:

See Attached

WILL THERE BE A RAFFLE? (Contact Village Clerk at 708-403-6150)

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PHONE #

EMAIL

WILL THERE BE LIVE ENTERTAINMENT? (Music must end by 10:30PM Sun-Th, 11:30PM Fri-Sat)

YES

WILL THERE BE TEMPORARY SIGNAGE? (Banners, Inflatables, Etc.)

NO

WILL THERE BE A TENT?

YES

WILL THERE BE ANY STRUCTURES OTHER THAN A TENT? (Stage, Etc.)

NO

If YES, list structures:

WILL THERE BE ANY ROAD OR SIDEWALK OR RIGHT-OF-WAY CLOSURES?

NO

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1. The route to be traveled, the starting point, the termination point, and the location of any stopping point, speakers' platforms, or similar, if any. (A. Provide Map, B. Google Aerial Image with route traced is OK.)

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Please attach the above information if your event falls into the applicable category.

APPLICANT NAME

Cirque Entertainment III, LLC Manuel Rebecchi

DATE

06/24/2025 12:00 AM

I attest that the information provided above is to the best of my knowledge accurate. I understand that by checking this box and providing my name and date above, this also acts as my signature.

Checking this box also acts as my signature.

Thank you,
Village of Orland Park, IL

This is an automated message generated by Granicus. Please do not reply directly to this email.



Orland Square
4.3 (9,342)
Shopping mall · 6

Overview Reviews About

Directions Save Nearby Send to phone Share

Longtime indoor mall with numerous fashion brands, beauty services, restaurants & a food court.

288 Orland Square Dr, Orland Park, IL 60462

Open · Closes 8 PM
Juneteenth might affect these hours

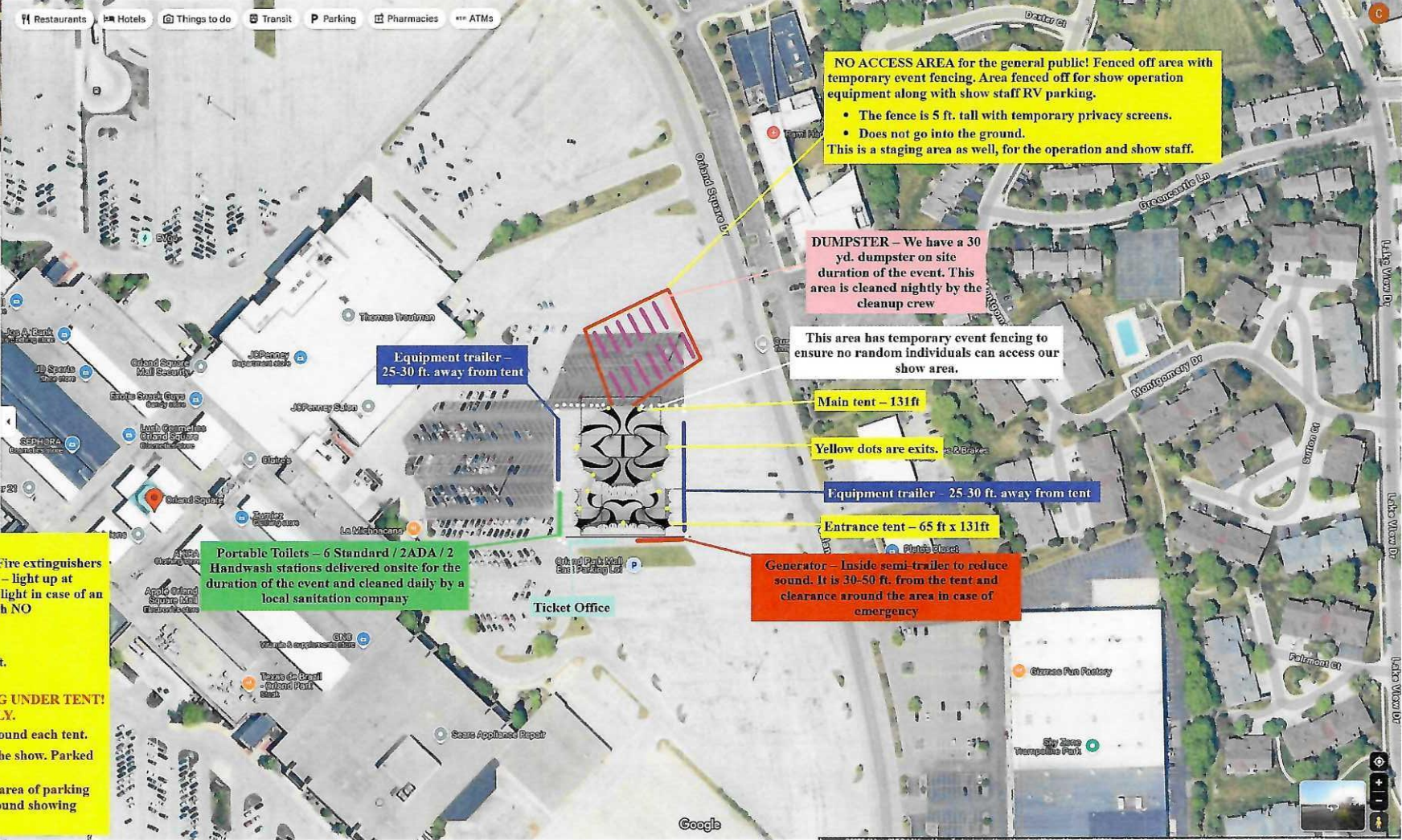
simon.com

(708) 349-1646

J592-VM Orland Park, Illinois

NOTES:
Both tents have **NO SMOKING** signs and Fire extinguishers throughout tents and at all exits. Exit signs – light up at every exit with the generator on as backup light in case of an emergency. No fire performances along with NO Pyrotechnics in the show! **NO ANIMALS!**
Main tent is round – 131ft
Entrance tent is rectangular – 65 ft. x 131 ft.
Tent capacity is 998 seats
Front tent has concessions – NO COOKING UNDER TENT! PRE-MADE & BOUGHT PRODUCT ONLY.
Anchoring tent is with stakes located all around each tent.

- Parking is directed by staff that run the show. Parked in rows of 50 (parallel).
- Designated ADA parking in the front area of parking closest to the tent with signs in the ground showing area.





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6-24-25

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS 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(ies) 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 A to Z Insurance Solutions LLC 700 Rosemary Ave Suite 204 West Palm Beach, FL 33420	CONTACT NAME: Justin Carvalho	
	PHONE (A/C, No, Ext): 561-570-2099	FAX (A/C, No):
INSURED Cirque Entertainment LLC aka Cirque Show & Equipment, LLC 2903 9th St W Bradenton, FL 34205	E-MAIL ADDRESS: info.atozins@gmail.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Clear Blue Insurance Company	NAIC # 28860
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER:	Y	Y	CZ26FLGL0008-00	4/1/25	4/1/26	EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 4,000,000 PRODUCTS - COMP/OP AGG \$ 4,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY			CZ28FLCA0001-00	4/1/25	4/1/26	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
A	<input type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$	Y	Y	CZ27FL3X0005-00	4/1/25	4/1/26	EACH OCCURRENCE \$ 3,000,000 AGGREGATE \$ 3,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A				PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Battlefield Mall, LLC a Delaware limited liability company. its managing agents, Simon Property Group, Inc. Simon Management Associates, LLC and their respective officers, directors, shareholders, members, partners, parents, subsidiaries are added as an additional insured but only with respects to the operations of the named insured during the policy period.

Event dates: July 21-29, 2025 (including load in and load out)

CERTIFICATE HOLDER**CANCELLATION**

Orland Square
288 Orland Square
Orland Park, IL 60462

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Justin Carvalho



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/24/2025

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PRODUCER Accretive Global Risk Advisors, LLC dba Libertate Insurance Services 20 N. Orange Avenue, Suite 500 Orlando, FL 32801 www.libertateins.com		CONTACT NAME: Engage PEO Certificate of Insurance Dept. PHONE (A/C, No, Ext): 727-565-2950 FAX (A/C, No): 833-281-6731 E-MAIL: wcpolicy@engagepeo.com ADDRESS:	
INSURED The S2 HR Group, LLC dba Engage PEO 4211 W. Boy Scout Blvd., Suite 500 Tampa FL 33607		INSURER(S) AFFORDING COVERAGE INSURER A: SUNZ Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 34762	

COVERAGES

CERTIFICATE NUMBER: 85899881

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD 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.

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	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
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DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Coverage provided for all leased employees but not subcontractors of: Cirque Entertainment LLC
Client Effective Date: 1/1/2023
Event dates: July 25-28

CERTIFICATE HOLDER

228482

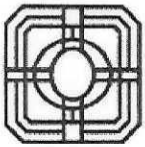
Orland Square
288 Orland Square
Orland Park IL 60462

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Paul R. Hughes



ORLAND PARK

DEVELOPMENT SERVICES DEPARTMENT
14700 RAVINIA AVENUE
ORLAND PARK, ILLINOIS 60462
708-403-5300
www.orlandpark.org

PERMIT # _____

SPECIAL EVENTS – STAGE/PLATFORM, PORTABLE TOILETS, DUMPSTERS, FENCING, AND OTHER STRUCTURES

You must include a detailed Site Map showing the location of the following: tents and canopies; stages; signage; portable toilets; dumpsters; fences; any other structures; alcohol, food, and merchandise service/sale; and proposed street/sidewalk closures.

☐ Will your event include the use of **PORTABLE TOILETS**? **Yes**

The Village recommends two portable toilets, one handicapped stall, and two hand-washing stations per 100 people. *All portable toilets must be removed from Village property within 24 hours after your event.*

Company Name: Perfect Potty Phone # _____

Number of Portable Toilets: 6 Number of Handicapped Stalls: 2 Number of Hand-Washing Stations 2

☐ Will your event include the use of **DUMPSTERS on village property**? **Yes**

The Village requires that all areas must be clean of debris. Attach plan of how garbage and waste will be removed from event site. Dumpster placement at Centennial Park will be in parking spaces 577 to 580 in the Metra East Daily Parking Lot. *Dumpsters must be removed within 24 hours after your event.*

Waste Company Name: Budget Dumpster Phone # 216-416-2622

Number of Dumpsters: 1 30yd dumpster

☐ Will your event include the installation of **FENCING or OTHER STRUCTURES**?

Description(s): Event owned fencing sets up around the event area.

☐ Will your event be **publicly advertised**?

How will your event attendees be notified or invited to the event? Radio, Social Media, Online

☐ If your event is requesting a **street or sidewalk closure**, attach map noting what type of traffic control devices (i.e., traffic signal, Police, barricades, specialized equipment, cones or signs) will be used to close the area. Also note if there will be any control fencing. No markings on paths are allowed. Signage must be used and removed. **No**

☐ If your event is a **run, walk**, or other activity in which participants will be following a course, then you must attach a map and a written description of the proposed route. Additionally, the Village is not responsible for any costs associated with the denial of a proposed route. **No**

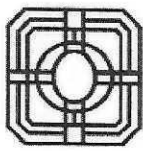
☐ Have you made provisions for **onsite security** services? Any event requiring the use of the Orland Park Police Department will be billed per officer per hour. For more information, contact the Police Department at (708) 349-4111, ask for the Patrol Commander. **Yes, one officer per show.**

Depending on the size and activities of your proposed event, The Village of Orland Park may require the presence of security personnel. Event organizers are responsible for the actions and conduct of any and all persons and organizations (participants, spectators, sponsoring organization, its Officers, Employees or agents or any person under their control insofar as permitted by law) associated with the permitted event. Furthermore, the event organizer is responsible for and will bear all costs related to policing, cleaning, and restoring the park upon conclusion of the event or activity and will reimburse the Village for any such costs incurred by the Village.

Manuel Rebecchi / Owner
NAME OF APPLICANT (please print)

[Signature]
SIGNATURE OF APPLICANT

6/24/2025
DATE



ORLAND PARK

DEVELOPMENT SERVICES DEPARTMENT
14700 RAVINIA AVENUE
ORLAND PARK, ILLINOIS 60462
708-403-5300
www.orlandpark.org

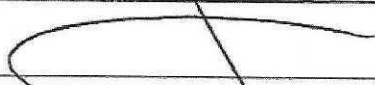
TEMPORARY FOOD SERVICE PERMIT APPLICATION

Event Information		Application Date: 6/24/2025		
Event Name: Paranormal Cirque				
Location: Orland Square - 288 Orland Square Dr, Orland Park, IL 60462				
Set Up Date: July 22, 2025		Set Up Time: 11am		Event Times: **See schedule attached**
Event Dates: Starting 7 / 25 / 2025 / Ending: 7 / 28 / 2025 /				
Will be at this location for 4 days/dates. If not consecutive days, list dates here:				
Date:	Date:	Date:	Date:	Date:

*This permit is only good for one location, for a maximum of the fourteen (14) days listed above.

Vendor Information		
Organization/Business Name: Paranormal Cirque - Trailer #1		
Address: 2903 9 th St W		
City: Bradenton	State: FL	Zip Code: 34205
Phone#: (941) 539-3596	Illinois State Tax ID#:	
Organization Chairperson/Business Owner		
Name: Manuel Rebecchi	Phone#: (941) 539-3596	
For vendors using multiple booths note Booth #: #1		

We are the only vendor at the event, 2 booths.

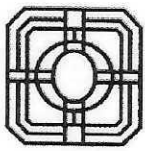
Applicant's Signature	Printed Name
	Manuel Rebecchi - Owner
Health Inspector's Signature	Printed Name

*Application and fee shall be received at least 30 days in advance of the event. Sanitarian must approve menu and booth questionnaire before a permit can be issued.

*Fee is payable by cash, check or Visa/MasterCard at the Village Hall. The fee is nonrefundable.

For Office Use Only			
Permit Type:	<input type="checkbox"/> Food Festival	<input type="checkbox"/> School	<input type="checkbox"/> Other
San ID #:	Risk Type:		
Fee Type:	Fee Amount:		

Permit #	Date Issued:
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ORLAND PARK

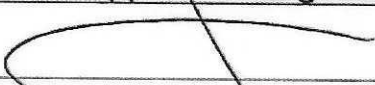
DEVELOPMENT SERVICES DEPARTMENT
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ORLAND PARK, ILLINOIS 60462
708-403-5300
www.orlandpark.org

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Event Dates: Starting 7 / 25 / 2025 / Ending: 7 / 28 / 2025 /				
Will be at this location for 4 days/dates. If not consecutive days, list dates here:				
Date:	Date:	Date:	Date:	Date:

*This permit is only good for one location, for a maximum of the fourteen (14) days listed above.

Vendor Information		
Organization/Business Name: Paranormal Cirque - Trailer #2		
Address: 2903 9 th St W		
City: Bradenton	State: FL	Zip Code: 34205
Phone#: (941) 539-3596	Illinois State Tax ID#:	
Organization, Chairperson/Business Owner		
Name: Manuel Rebecchi	Phone#: (941) 539-3596	
For vendors using multiple booths note Booth #: 2		
We are the only vendor at the event, 2 booths.		

Applicant's Signature	Printed Name
	Manuel Rebecchi - Owner
Health Inspector's Signature	Printed Name

*Application and fee shall be received at least 30 days in advance of the event. Sanitarian must approve menu and booth questionnaire before a permit can be issued.

*Fee is payable by cash, check or Visa/MasterCard at the Village Hall. The fee is nonrefundable.

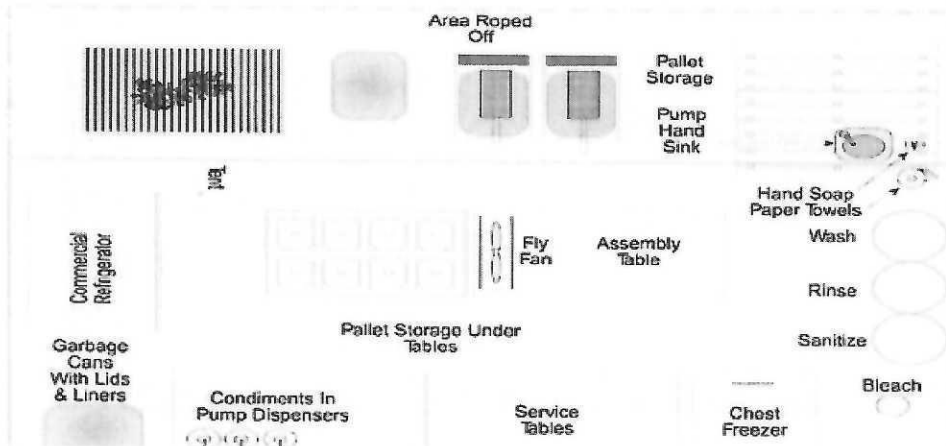
For Office Use Only			
Permit Type:	<input type="checkbox"/> Food Festival	<input type="checkbox"/> School	<input type="checkbox"/> Other
San ID #:	Risk Type:		
Fee Type:	Fee Amount:		

Permit #	Date Issued:
-----------------	---------------------

Menu and Procedure Review		
Food to be Prepared	Supplier Information	Process of Transportation/Preparation to Event
<i>i.e. Hamburger</i>	<i>Gordon's Food Service</i>	<i>Transported in insulated container, held in commercial freezer, cooked on site to serve</i>
<i>i.e. Cooked Rice</i>	<i>Sysco</i>	<i>Made at restaurant, transported in insulated container and held at steam table</i>
Popcorn,	**We serve mostly prepackaged items**	
Cotton Candy,		
Snow Cones,	Bought at BJ's Wholesale, Costco, Sam's Club, Walmart, Gold Medal Products	
Slushies,	and Local grocery stores.	
Hotdogs,	Cold Hold: Fridge or freezer	
Nachos with cheese,	Hot Hold: Commercial Warmer/Roller/Steamer	
Bottled water,	**All is prepared onsite at event**	
Bottled soda,		
Lemonade.		
*We do not reheat, all leftovers are disposed of nightly**		

Answer the following questions about what equipment will be provided at your booth:

Where will your booth be located?	<input type="checkbox"/> Indoor	<input checked="" type="checkbox"/> Outdoor	**Inside Tent**
Approved transportation equipment for hot and cold foods.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	N/A
Mechanical hot holding equipment (i.e., no heat lamps or crockpots).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Mechanical cold holding commercial refrigeration or freezers (i.e., no household refrigerators).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Probe and equipment thermometers for checking food and equipment temperatures.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Flooring and overhead cover, if not provided by the organizer.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Dunnage racks or pallets to store all food and paper goods off the ground.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Additional clean, wrapped cooking utensils.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Dispensers for condiments (i.e., pre-packages, squeeze bottles or hinged lid containers).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Handwashing facilities with paper towels and liquid hand soap (i.e., a camp sink or a container with a hands free tap and a bucket to catch the waste water).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Clean clothes and hair covering (i.e., cap, visor, or bandana) for employees.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Wash, rinse and sanitize containers that are large enough to hold soiled utensils.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Cleaning supplies (i.e., dish soap, sanitizer, sanitizer test strips, brooms, trash bags, and garbage cans with lids).	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Wiping cloths and extra buckets, fans, containers for used cooking oil, and charcoal, extension cords, fire extinguishers, and first aid kits.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
All food is obtained from approved commercial sources (i.e., local stores, distributors, or restaurants). Home prepared food is prohibited.	<input checked="" type="checkbox"/>	<input type="checkbox"/>	
Vendor bringing prepared food from outside the Village of Orland Park – A current health inspection report for facility where food was prepared is required.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	



Example Booth Layout

**Provide Booth Layout
with your
Completed Application**



Security Plan

To whom it may concern,

Paranormal Cirque has its own crew of Certified Crowd Managers & Security Staff that travel with the event. Their main responsibilities include but are not limited to; Crowd Control, Patrolling the grounds and General Public Safety. (The crews take turns walking the grounds to ensure all is in order and provide overnight 24-hour surveillance)

1. One hour before the public arrives, they are to check the grounds to ensure all is in place for the event and the means of egress.
2. During the event they are to remain in and around the tents (making rounds) to ensure all is running smoothly.
3. At the end of the event, they are assigned to an exit to facilitate and assist the public as they exit the tents.
4. They are instructed to keep an eye out and report any suspicious or unusual activity directly to the Onsite / Emergency Manager who will then decide the appropriate course of action.

At **Paranormal Cirque** the safety and wellbeing of our audience is our main goal and responsibility, we want to ensure the patrons have an enjoyable and memorable experience with us. Thank you.



Total Quality. Assured.

16015 Shady Falls
Elmendorf, Texas 78112

Telephone: 210-635-8100
Facsimile: 210-635-8101
www.intertek.com/building

TEST REPORT FOR SERGE FERRARI

Report No.: 103491724SAT-003

Date: 5/9/18

REPORT ISSUED TO

Serge Ferrari
Zone Industrielle BP 54
38352 La Tour Du Pin Cedex
La Tour Du Pin, 38110
France

SECTION 1

SCOPE

Intertek Building & Construction (B&C) was contracted by Serge Ferrari, Zone Industrielle BP 54, 38352 La Tour Du Pin Cedex, La Tour Du Pin, 38110, France, to evaluate the flame spread and smoke developed properties of 1002. Testing was conducted at the Intertek B&C test facility in Elmendorf, Texas. Results obtained are tested values and were secured by using the designated test method(s). A summary of test results and the complete graphical test data is reported herein.

This report does not constitute performance certification of this product nor an opinion or endorsement by this laboratory.

SECTION 2

SUMMARY OF TEST RESULTS

Specimen I.D.: 1002

ASTM E84-18 Test Results

FLAME SPREAD INDEX	SMOKE DEVELOPED INDEX
5	350

For INTERTEK B&C:

COMPLETED BY: Joseph Martinez

TITLE: Technician

SIGNATURE:

DATE: 5/9/18

REVIEWED BY: Servando Romo

TITLE: Project Engineer

SIGNATURE:

DATE: 5/9/18

This report is for the exclusive use of Intertek's Client and is provided pursuant to the agreement between Intertek and its Client. Intertek's responsibility and liability are limited to the terms and conditions of the agreement. Intertek assumes no liability to any party, other than to the Client in accordance with the agreement, for any loss, expense or damage occasioned by the use of this report. Only the Client is authorized to permit copying or distribution of this report and then only in its entirety. Any use of the Intertek name or one of its marks for the sale or advertisement of the tested material, product or service must first be approved in writing by Intertek. The observations and test results in this report are relevant only to the sample(s) tested. This report by itself does not imply that the material, product, or service is or has ever been under an Intertek certification program.

SERGE FERRARI SAS

TEST REPORT

SCOPE OF WORK

NFPA 701-2019, METHOD 2 - STANDARD METHODS OF FIRE TESTS FOR FLAME PROPAGATION OF TEXTILES AND FILMS FOR FLAT SHEETS (SEE SECTION 13.1.3) ON 702 OPAQUE

REPORT NUMBER

105207650MID-001B

TEST DATE(S)

10/05/22

ISSUE DATE

10/06/22

[REVISED DATE]

N/A

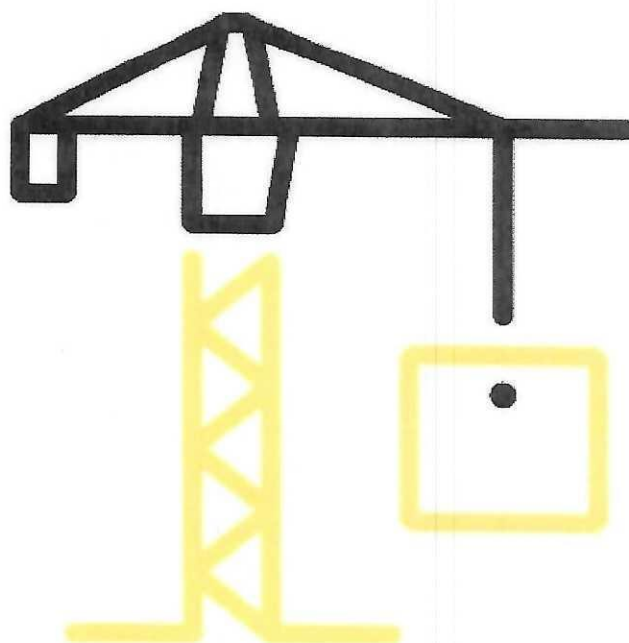
PAGES

5

DOCUMENT CONTROL NUMBER

GFT-OP-10c (09/29/20)

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TEST REPORT FOR SERGE FERRARI SAS

Report No.: 105207650MID-001B

Date: 10/06/22

REPORT ISSUED TO

SERGE FERRARI SAS

Zone Industrielle BP 54
38352 La Tour Du Pin Cedex
La Tour Du Pin, 38110
France

SECTION 1

SCOPE

Intertek Testing Services NA, Inc. dba Intertek Building & Construction (B&C) was contracted by Serge Ferrari SAS, Zone Industrielle BP 54, 38352 La Tour Du Pin Cedex, La Tour Du Pin, 38110, France to perform testing in accordance with NFPA 701-2019, Method 2 - *Standard Methods of Fire Tests for Flame Propagation of Textiles and Films for Flat Sheets* (See section 13.1.3), on their 702 Opaque. Results obtained are tested values and were secured by using the designated test method(s). Testing was conducted at Intertek test facility in Middleton, WI.

Unless differently required, Intertek reports apply the "Simple Acceptance" rule also called "Shared Risk approach," of ILAC-G8:09/2019, Guidelines on Decision Rules and Statements of Conformity.

Intertek B&C will service this report for the entire test record retention period. The test record retention period ends four years after the test date. Test records, such as detailed drawings, datasheets, representative samples of test specimens (where required by Certification or Accreditation bodies), or other pertinent project documentation, will be retained for the entire test record retention period.

SECTION 2

SUMMARY OF TEST RESULTS

702 Opaque met the specified performance requirements.

For INTERTEK B&C:

COMPLETED BY:	Joel Zumwalt	REVIEWED BY:	Sandy Osborne
TITLE:	Lab Technician III	TITLE:	Lab Technician I
SIGNATURE:		SIGNATURE:	
DATE:	10/06/22	DATE:	10/06/22

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TEST REPORT FOR SERGE FERRARI SAS

Report No.: 105207650MID-001B

Date: 10/06/22

SECTION 3

TEST METHOD(S)

The specimens were evaluated in accordance with the following:

NFPA 701-2019, Standard Methods of Fire Tests for Flame Propagation of Textiles and Films

SECTION 4

MATERIAL SOURCE/INSTALLATION

Test samples were provided by the client. The results outlined in this report apply to the sample as received. Samples were received at the Evaluation Center on October 3, 2022 in good condition verified by Sample ID# MID2210031411-002.

SECTION 5

EQUIPMENT

EQUIPMENT			
DESCRIPTION - ASSET #:	Stopwatch - 1404	CALIBRATION DUE:	4/5/2023
DESCRIPTION - ASSET #:	Oven - 1200	CALIBRATION DUE:	FRO
DESCRIPTION - ASSET #:	Scale - 1396	CALIBRATION DUE:	4/5/2023
DESCRIPTION - ASSET #:	Test Cabinet - 1203	CALIBRATION DUE:	FRO
DESCRIPTION - ASSET #:	Flowmeter - 1209	CALIBRATION DUE:	8/5/2023
DESCRIPTION - ASSET #:	Burner - 1473	VBU:	10/5/2022
DESCRIPTION - ASSET #:	Oven Logger - 701	CALIBRATION DUE:	1/6/2023
DESCRIPTION - ASSET #:	Temp/Humid Reader - 1562	CALIBRATION DUE:	2/2/2023
DESCRIPTION - ASSET #:	Temp/Humid Reader Sample Rm - 1451	CALIBRATION DUE:	3/21/2023

SECTION 6

TEST PROCEDURE

Testing was conducted in accordance with Chapter 14; Flame Test Procedures for Test Method 2. There were no deviations to the standard.

SECTION 7

TEST CRITERIA

TEST CRITERIA	
1. No specimen shall continue flaming for more than two sec.	
2. Length of char shall not exceed 17.1 in from the bottom edge of the specimen.	
3. No flaming on the floor of apparatus is allowed for longer than 2 sec.	

TEST REPORT FOR SERGE FERRARI SAS

Report No.: 105207650MID-001B

Date: 10/06/22

SECTION 8

TEST SPECIMEN DESCRIPTION

Samples were received as a large roll white in color consisting of Polyester yarns (1100 dtex) coated with PVC flame retardant on both sides and varnished. Weight : 830 g/m²+5% Thickness: 0.63 mm+-10% Polyester yarn 1100 dtex : 24% - PVC flame retardant : 76%. It was then cut to ten approximately 47" by 5" panels. The panels were subjected to conditioning for at least 60 minutes at 105°C ± 3°C and not more than 180 minutes by Intertek prior to testing.

SECTION 9

TEST RESULTS

TEST RESULTS			
Specimen	After Flame	Floor Flaming (sec)	Char Length (in)
1	0	0	6.13
2	0	0	7.00
3	0	0	6.06
4	0	0	7.38
5	0	0	7.50
6	0	0	7.19
7	0	0	7.50
8	0	0	6.19
9	0	0	6.75
10	0	0	6.19
Average	0	0	6.79

OBSERVATIONS

Specimens ignited upon introduction to test flame producing light grey smoke. Specimens self-extinguished prior to removal of test flame. Specimens exhibited no flaming dripping.

SPECIMEN DENSITY			
	Specimen 1	Specimen 2	Specimen 3
Weight (g)	8.78	8.71	8.83
Length (mm)	101	101	101
Width (mm)	100	100	101
g/m ²	869.31	862.38	865.60
		Average	865.76

SECTION 10

CONCLUSION

No specimen continued flaming for more than two seconds. The length of char did not exceed 17.1 inches from the bottom edge of the specimen for flat sheets (see section 13.1.3). No flaming on floor of apparatus lasted longer than two seconds.

702 Opaque met the specified performance requirements.

TEST REPORT FOR SERGE FERRARI SAS

Report No.: 105207650MID-001B

Date: 10/06/22

SECTION 11

REVISION LOG

REVISION #	DATE	SECTION	REVISION
0	10/06/22	N/A	Original Report Issue



High Wind Action Plan

In the event of High winds of more than 45mph, Designated Team Leaders begin immediate evacuation of the Tent with the assistance of the designated staff leaders who are certified in Crowd Management. The sound crew will then notify the public immediately regarding the evacuation over the PA system.

The public will hear the following instructions:

Please listen to the following Instructions: "We request at this time the Immediate evacuation of the tent. Please proceed to the nearest exit closest to you. Please look around you, there are seven exits located in the Tent. We ask that you walk, not run to the nearest exit which will lead you outside of the Tent to safety. Where there will be Paranormal Cirque staff awaiting to assist.

Paranormal Cirque staff and crew will assist in leading the public safely away from the structure of the Tents. All staff and crew have two-way radios to communicate quickly in such cases of emergency. Staff is easily Identified as they will be wearing neon vest and will have flashlights. Once the public is cleared out of the tent, the Staff will then also clear out of the tent and the Tent Boss will then oversee the tent structure to determine if it is safe to disassemble or remove the tent from the site due to the severity of the weather. In which we have wind monitoring devices that help determine the steps that Paranormal Cirque staff will take in either the removal of the tent or a full personnel evacuation from the premises to safety.

Thank you.



Emergency Fire and Evacuation Plan

At Paranormal Cirque the safety of the audience, its employees and its venues is of paramount importance to management and staff. And with total safety in mind, we have developed the following procedure to deal with emergencies and evacuation of the tent, whether due to fire or any other public safety emergency. The procedure consists of three specific actions that all staff are trained and familiar with.

1. In the event of an evacuation due to fire or other public safety emergency, they will follow the protocol in section of this plan as well as the direction of the Fire Team Members who will also be providing emergency action instructions.
2. Once safely out of the tent, staff will proceed to the predetermined external SAFE location (The Mall Building) a safe distance away from the tent.
3. The Fire Safety Team Members assigned to each exit have two-way radios to communicate with management and obtain the most up to date information regarding the status of the tent, to provide instructions for staff members and assist exiting patrons if needed.

A. Emergency Instructions

1. In the event of a Fire or any other emergency 911 is the first call, (Done by the Onsite & Emergency manager.) All staff is then notified by way of radios and or cellphones.
2. In the Tent the show will stop, all lights will come on and the audience will be informed over the PA system of the emergency at hand and will be given instructions to walk not run to the nearest exit calmly and safely.
3. 3. Direct Verbal Instructions will continue over the Tent PA System.

In addition to the Instructions above if you see a fire or smell smoke, please try to immediately contact one of the Fire safety team members located at each entrance. If you cannot find a Fire Safety team member, please advise someone in the front tent or at the ticket office of the situation and they will make sure to tend to the emergency. There are Fire Extinguishers at every exit and emergency exit signs next to each entrance and exit of the tent.

B.

1. After notifying staff or receiving instructions to evacuate quickly try to do as many of the following things as possible **if safe to do so.**
1. Terminate all performances, music, phone conversations, meetings, and vacate both tents and restrooms ASAP.
2. Close any cabinet drawers secure any monies. Or funds in areas that have such requirements.
Close box office doors behind you, remain calm and head for the emergency SAFE location.
3. Leave TENTS quickly and proceed to the predetermined SAFE location and check in with the Fire Safety members.
4. It is important for you to check in with the Fire Safety team staff once you have arrived safely at the SAFE location as they will have the two-way radios and will be in touch with the emergency service personnel and they can advise when and if, it will be safe to return to the tent. Checking in will also enable the Fire Safety Team to determine if any staff members are still in the tent.
5. In the event of a non-fire emergency, Staff will follow the same instructions as above. Staying in contact with the Fire Team Staff will keep you informed of any instructions that may need to be followed as they are in contact with the Emergency Service personnel during any emergency.

C. Technical Information

1. In the event of a Fire or smoke situation, Fire Safety Team members have portable flashlights and each exit has a fire extinguisher. There is also, a PA System throughout the tents. In this case all Management, Fire Team and Security Staff members stay closely connected if the need for an evacuation arises. In this case all teams work together to make that decision.

D. Fire Safety Teams and their Duties

At the direction of the onsite Emergency manager each tent has a Fire Safety Team composed of responsible and dedicated individuals who

undergo training in Fire safety and evacuation. The Fire Safety Team are periodically trained by a class that certifies them as a Crowd Manager. In every City / Location that we visit the Fire Department, Police and emergency offices are always provided with our emergency action plans. The Fire Safety Teams will direct evacuations of the tent and any emergency - including fires, high winds, blackouts, bomb threats or any other situation that will require evacuating the tent. In the event of fire or evacuation the staff shall determine the location of the fire or source of smoke and immediately assume an emergency and notify the onsite emergency manager. When necessary, the tent will be evacuated according to directions over the PA system with the following guidelines:

1. The most critical area for evacuation is the tent and all audience members in all locations in or near the tent. Evacuation from the locations shall be instituted when instructions from the crowd control managers indicate such action. Evacuation should be via unaffected areas.
2. Crowd control managers and staff shall see that all occupants are notified of the fire or other emergency and see that they proceed immediately to execute the fire safety and evacuation plan.
3. The crowd control managers on the premises will immediately notify the on site emergency manager who will then notify 911 of the particulars of the emergency.
4. In the event that exits are affected by fire and or smoke the fire safety team members will direct attendees to alternate exits if an exit is unusable or cut off for any reason.
5. Although the tents have emergency backup power systems, staff members make rounds several times a day to visually check for fire or smoke conditions.
6. In the event of a fire, fire safety teams will wear their emergency vests, have flashlights and portable radios to communicate with all staff.

E. Disabled employees or public.

1. It is the responsibility of crowd control managers to periodically meet to discuss the needs of any employees or disabled public attendees who would need assistance during an evacuation or emergency. Fire teams are responsible for maintaining an updated list of such personnel and public attendees and assign "buddies" to assist during an evacuation. Advanced plans are worked out regularly between the crowd control manager and staff to always maintain a plan in place to assure ADA people are assisted by and able to exit with the help of staff or personnel.
2. With the assistance of the designated control manager or coworker, a disabled audience member or employee should proceed to the ramp exit if assembled to assure safe exit and await assistance by authorized personnel.

3. If exits are determined to be unusable, this will be informed over the PA system and Fire safety team members and staff will then direct everyone to alternate exits.

Onsite and Emergency Manager

Dasha Artsyman (786) 606-6072

Tent Boss

Julio Cesar Espana (941) 726-0703

Tent #1 - Entrance Tent - Fire Team Members

Julio Cesar Espana

Darya Artsyman

Tent #2 - Main Tent - Fire Team Members

Alejandro Hernandez

Libra Portugal

ServSafe® CERTIFICATION

YURY BELAUS

for successfully completing the standards set forth for the ServSafe® Food Protection Manager Certification Examination, which is accredited by the ANSI (American National Standards Institute) National Accreditation Board (ANAB)–Conference for Food Protection (CFP).

27175996

CERTIFICATE NUMBER

4/2/2025

DATE OF EXAMINATION

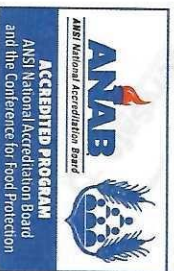
Local laws apply. Check with your local regulatory agency for recertification requirements.

10913

EXAM FORM NUMBER

4/2/2030

DATE OF EXPIRATION



#0655

Sherman Brown
Sherman Brown
Executive Vice President, Business Services





FLORIDA
RESTAURANT &
LODGING
ASSOCIATION

SAFE STAFF®

ServSafe®
National Restaurant Association



Florida
Department of
Business &
Professional Regulation
dpor

DBPR-CONTRACTED FOOD SAFETY PROVIDER

DBPR Approved Program Provider No. 1752486

GERMAN DURAN REYES

FOODHANDLER NAME

4/26/1995

DATE OF BIRTH

has successfully completed the SafeStaff®
Foodhandler Training Program

Cirque Entertainment

BUSINESS NAME

Tommy Toth

TRAINER'S NAME

17173489

TRAINER'S CFPM CERTIFICATE NUMBER

6266982

CERTIFICATE NUMBER

4/4/2023

DATE OF TRAINING

4/4/2026

DATE OF EXPIRATION





FLORIDA
RESTAURANT &
LODGING
ASSOCIATION

SAFE STAFF®

ServSafe®
National Restaurant Association



Florida
dpor
a Division of the
Department of Business
and Professional Regulation

DBPR-CONTRACTED FOOD SAFETY PROVIDER

DBPR Approved Program Provider No. 1752486

ROBERTO CARBAJAL CAMACHO

FOODHANDLER NAME

5/29/1972

DATE OF BIRTH

has successfully completed the SafeStaff®
Foodhandler Training Program

Cirque Entertainment

BUSINESS NAME

Tommy Toth

DATE OF TRAINING

8/13/2025

DATE OF EXPIRATION

TRAINER'S NAME

17173489

TRAINER'S CFPM CERTIFICATE NUMBER

5799912

CERTIFICATE NUMBER





FLORIDA
RESTAURANT &
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ASSOCIATION

SAFE STAFF®

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Florida
Department of
Business Regulation
dbpr

DBPR-CONTRACTED FOOD SAFETY PROVIDER

DBPR Approved Program Provider No. 1752486

YAMISELLY LEON

FOODHANDLER NAME

11/21/1977

DATE OF BIRTH

has successfully completed the SafeStaff®
Foodhandler Training Program

cirque italia

BUSINESS NAME

5/29/2024

DATE OF TRAINING

Tommy Toth

TRAINER'S NAME

5/29/2027

DATE OF EXPIRATION

24596306

TRAINER'S CFPM CERTIFICATE NUMBER

7104475

CERTIFICATE NUMBER





June 19, 2025

Village of Orland Park
14700 Ravinia Drive
Orland Park, IL 60462

Ref: Cirque Paranormal

To Whom It May Concern:

This letter serves as authorization for Cirque Paranormal to use Orland Square Mall's Parking Lot for the Cirque Paranormal Program. They have been approved for use of the parking lot for program dates 7/25/2025-7/28/2025 with set up taking place beginning 7/22/2025 and break down on 7/29/2025.

Cirque Paranormal assumes all responsibility for obtaining all required government approvals, obtaining and keeping effective all licenses and permits necessary for the event, and shall otherwise comply with all applicable governmental rules and regulations.

If you have any questions regarding Orland Square Mall's authorization for Cirque Paranormal's parking lot usage submission to the Village of Orland Park, please contact Mall Management/Marketing at 708.349.1647.

Sincerely,

Cathy Mein

Cathy Mein
Director of Marketing

Orland Park, IL

When: July 25th – 28th, 2025

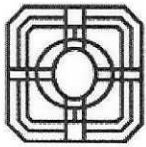
Where: 288 Orland Square Dr, Orland Park, IL 60462

At: Orland Square

Near: In the parking lot.

—Under the stunning White & Black Big Top Tent

- **July 25 – Friday: 7:30pm**
- **July 26 – Saturday: 6:30pm & 9:30pm**
- **July 27 – Sunday: 5:30pm & 8:30pm**
- **July 28 – Monday: 7:30pm**



ORLAND PARK

DEVELOPMENT SERVICES DEPARTMENT
14700 RAVINIA AVENUE
ORLAND PARK, ILLINOIS 60462
708-403-5300
www.orlandpark.org

Permit # _____

SPECIAL EVENT - TENT RULES & REQUIREMENTS

- ✓ A site plan is required showing where the tent/event will be set up and the dimensions of the tent.
- ✓ The tent shall not obstruct any accessible parking spaces, fire lanes, fire hydrants or fire department connections.
- ✓ A flame resistant certificate per NFPA 701 or ASTM E 84 by an acceptable testing laboratory for tents in excess of 400 square feet.
- ✓ If you are leasing your business space, written permission from your landlord is required!
- ✓ Tents are only allowed on the site where your business is located. No off site tents are allowed.
- ✓ A note on the submitted plans stating, "No smoking, no fireworks, no open flames or devices emitting open flame or fire will be used in the tent."
- ✓ A note on the submitted plans stating "a 4A 60BC fire extinguisher will be provided and mounted no higher than 48" above finished floor to the handle."
- ✓ If you are using a tent with the side down, defined exits shall be required to be shown on the plans based on the number of attendants.
- ✓ Occupant load signs will be printed by the Building Division and placed at the tent entrances/exits.

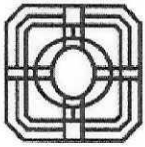
TENT #	SIZE	LOCATION
1.	65ft x 131ft	Orland Square
2.	131ft round	288 Orland Square Dr, Orland Park, IL 60462
3.		
4.		
5.		

Manuel Rebecchi - Owner
Applicant Printed Name

Applicant Signature

6/24/2025
Date

BUILDING OFFICIAL



ORLAND PARK

DEVELOPMENT SERVICES DEPARTMENT
14700 RAVINIA AVENUE
ORLAND PARK, ILLINOIS 60462
708-403-5300
www.orlandpark.org

PERMIT# _____

The Freedom of Information Act (FOIA)

Any information provided on this form is subject to the Freedom of Information Act and may be released as part of a document request. If you do not want personal information released to the public, please provide alternative contact information or clearly note that it is personal/private contact information.

ELECTRICAL PERMIT APPLICATION

About the location where work is being done:	Address: Orland Square - 288 Orland Square Dr, Orland Park, IL 60462					
	Business or Homeowner Name: Cirque Entertainment III LLC / Manuel Rebecchi					
	Business or Homeowner Phone: (941) 539-3596					
Describe electrical work being done:	**Event runs on event owned generator**					
Cost of work:	\$ 250.00	<input type="checkbox"/> Residential	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Industrial	<input type="checkbox"/> Medical	<input type="checkbox"/> Office
About the contractor who will be doing the work:	Business Name: Cirque Entertainment III LLC / Paranormal Cirque				CL#	
	Business Address: 2903 9 th St W, Bradenton, FL 34205				Bond Exp:	
	Supervising Electrician: Event / Owner set up					
	Registration#		Municipality:		Expiration:	
	Phone: (941) 539-3596		Email: rosa@cirqueitalia.com			

Service: <input type="checkbox"/> New <input type="checkbox"/> Revised <input type="checkbox"/> Not changing					
Voltage _____ Amperage _____ Phase _____					
					(Village Use)
Number of new/revised circuits and outlets				Low voltage	Fee
	2 WIRE	3 WIRE	4 WIRE	<input type="checkbox"/> Security Alarm	
15 & 20 Amp				<input type="checkbox"/> Phone/Cable/Internet	
30 Amp & higher				<input type="checkbox"/> Other Low Voltage Wiring	

Total Fee:

Applicant:	I, the Owner/Agent/Contractor, for the above property hereby apply to the Development Services Department of the Village of Orland Park, IL for a permit to erect, alter, construct, or enlarge the structure or part thereof herein described, and if granted the permit applied for, agree to comply with all requirements of the village ordinances relating thereto by such ordinances, including but not limited to paying the fees required and requesting necessary inspections. I hereby agree to comply with the applicable Electrical Codes adopted by the Village of Orland Park.	
Supervising Electrician Signature _____ Event / Owner Set up - Manuel Rebecchi / Owner Date 6/24/2025		
Village Use:	Electrical Inspector- Print name, sign and date:	



FLAME RETARDANT

Fabric Registration

LICENSE NUMBER: F-044402

PRECONSTRAINT 702, 392

Product Marketed by:

SERGE FERRARI

ZONE INDUSTRIELLE-BP54-38352

LA TOUR DU PIN-CEDEX, ,

Issue Date : 05/19/2025

Expiration Date : 06/30/2026

This product meets the minimum requirements of flame resistance established by the California State Fire Marshal for products identified in Section 13115, California Health and Safety Code.

The scope of the approved use of this product is provided in the current edition of the
**CALIFORNIA APPROVED LIST OF FLAME RETARDANT CHEMICALS AND
FABRICS, GENERAL AND LIMITED APPLICATIONS CONCERNS** published by the
California State Fire Marshal.

C Walker

Issued By Cortney Walker
Fire Engineering License Manager
Fire Engineering & Investigations Division

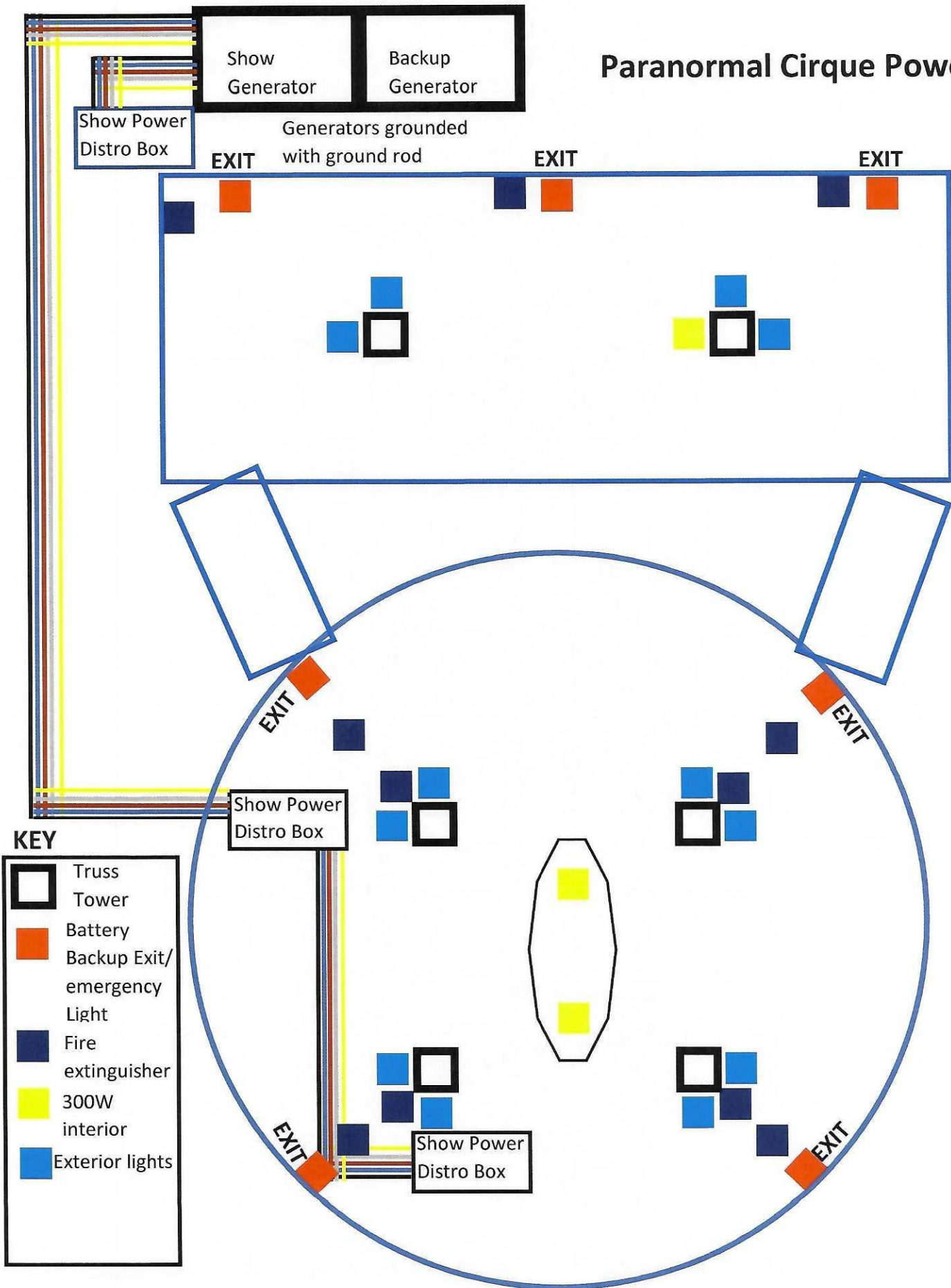
Patricia J. Setter

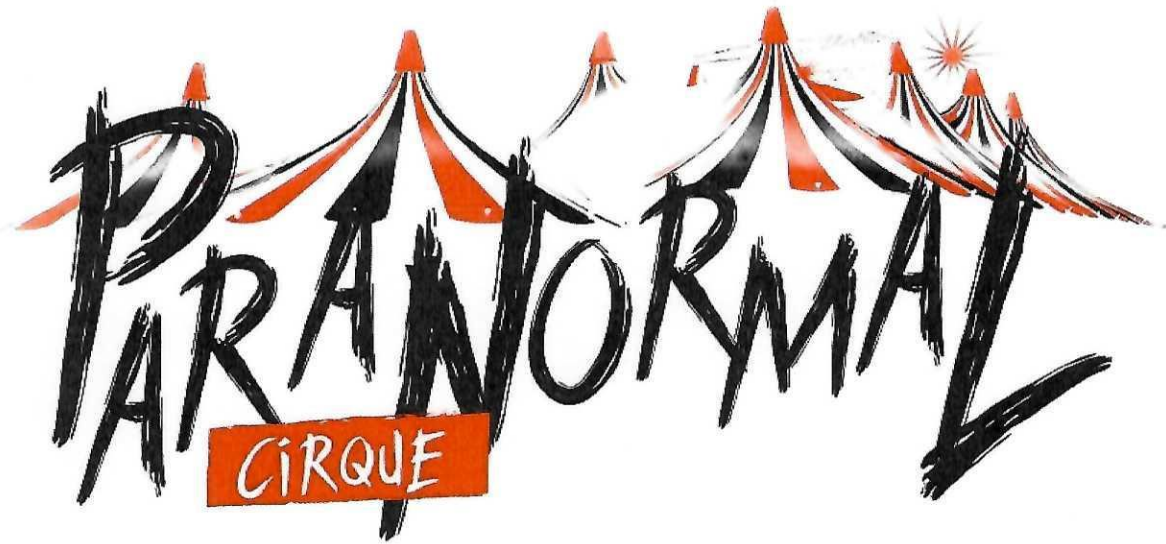
Reviewed and Approved By Patricia Setter
Program Coordinator
Fire Engineering & Investigations Division

OFFICE OF THE STATE FIRE MARSHAL

Please visit uatcalfire.govmotus.org for more information on Licensing and Permitting with CAL FIRE

Paranormal Cirque Power Plan



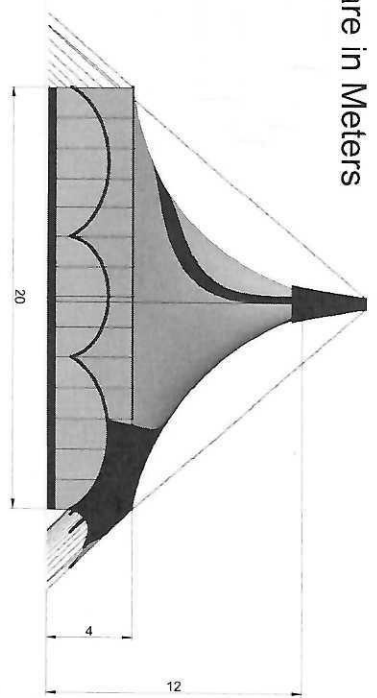


Public Safety Announcement

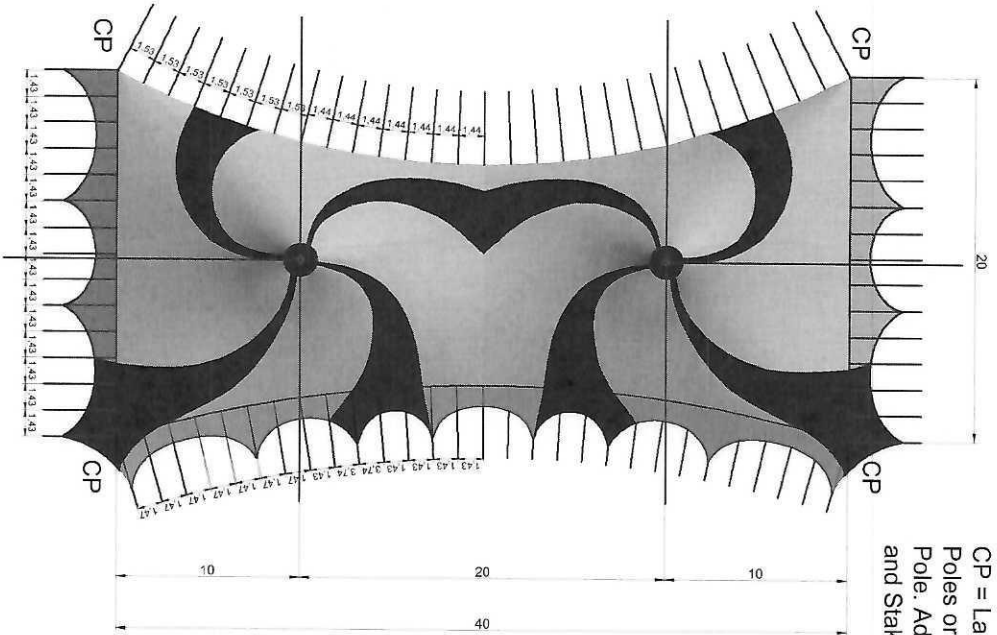
At the beginning of every performance the public will hear,

Welcome all to the 2024 Edition of Paranormal Cirque before we begin the show today, we'd like to make you all aware of the emergency exit locations in our tent. Please look around you and make yourself aware of the lighted exit signs and their locations. In case of an emergency, we ask that you walk, not run to the nearest exit to you which will lead you outside of the tent to safety, and where Paranormal Cirque staff will be waiting to assist you.

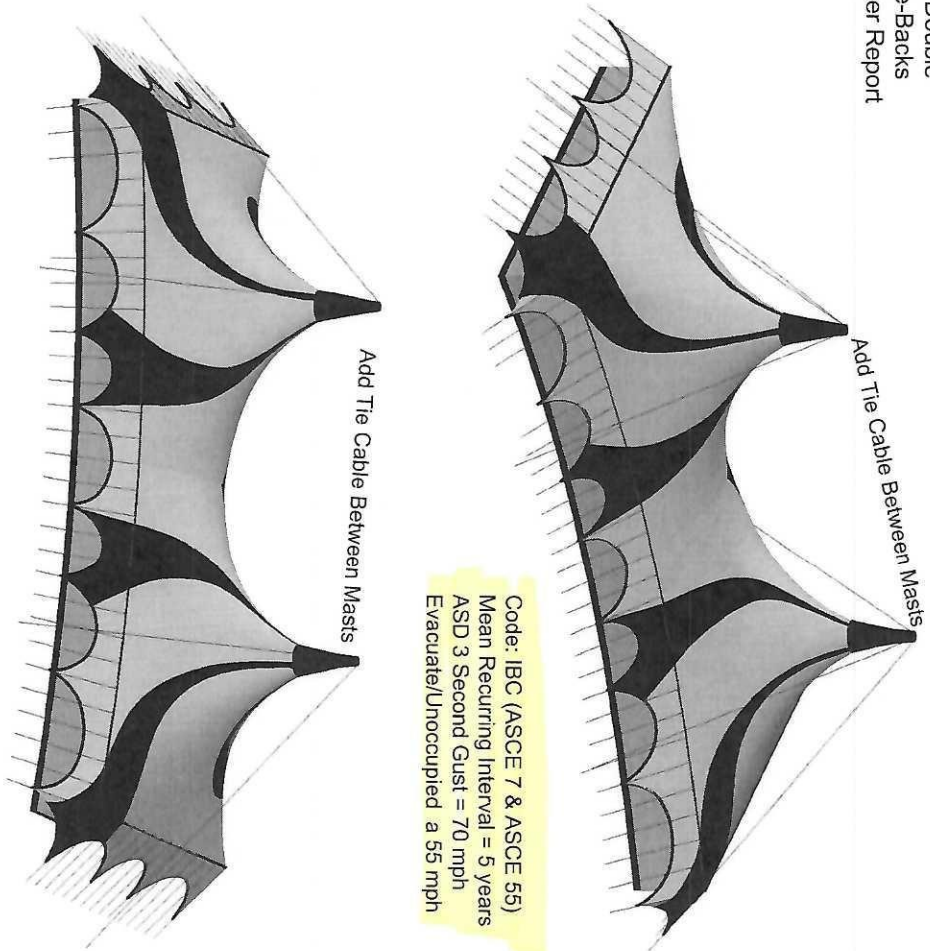
Thank you for your attention.



Dimensions are in Meters



CP = Larger Corner Poles or use Double Pole. Add Tie-Backs and Stakes per Report



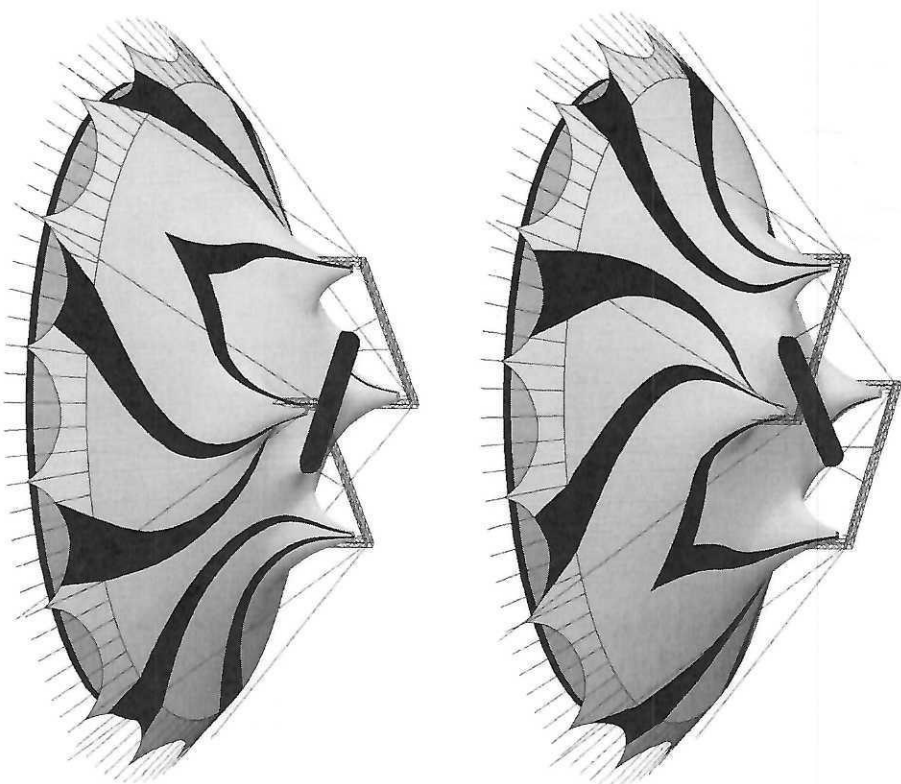
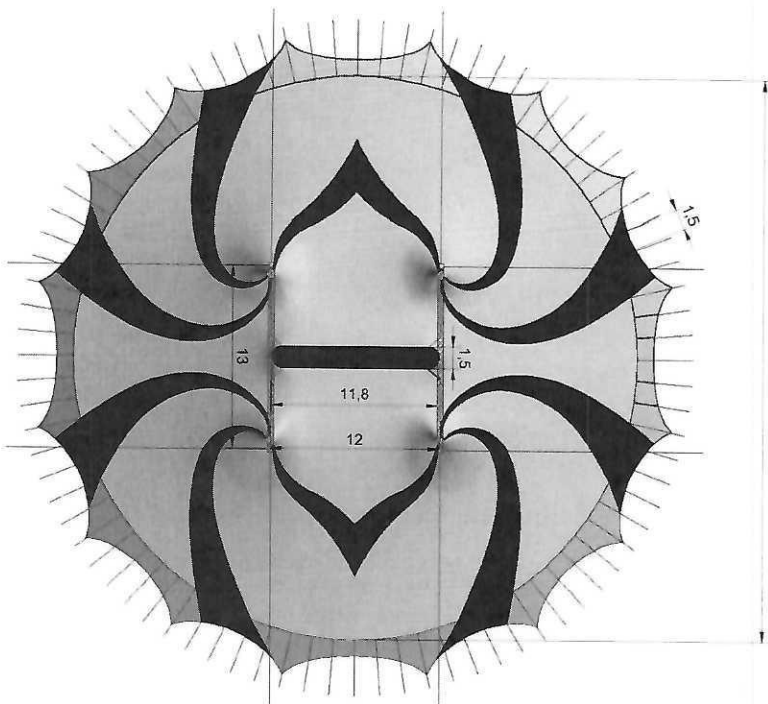
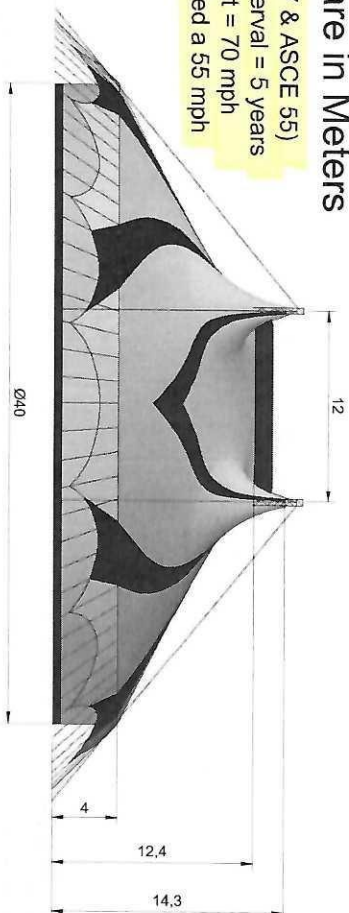
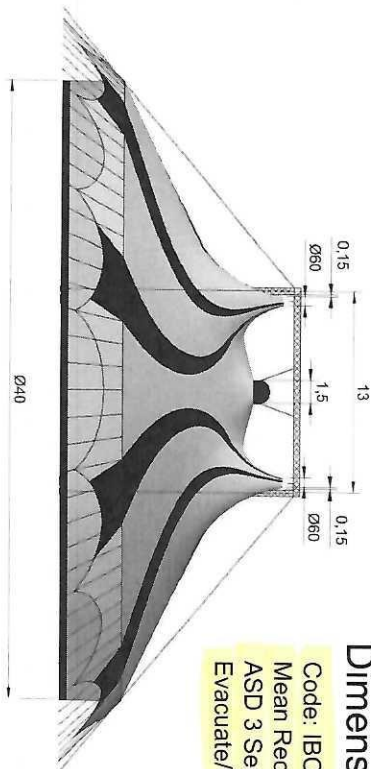
Code: IBC (ASCE 7 & ASCE 55)
Mean Recurring Interval = 5 years
ASD 3 Second Gust = 70 mph
Evacuate/Unoccupied a 55 mph

CLIENTE	CIRQUE ITALIA PARANORMAL	
CONTENUTO	ENTRATA 20 X 40 mt a 2 antenne	
RIF.		
COD.375		
DISEGNO	IP. 01	
DATA	00/00/00	

[illegible]

Dimensions are in Meters

Code: IBC (ASCE 7 & ASCE 55)
Mean Recurring Interval = 5 years
ASD 3 Second Gust = 70 mph
Evacuate/Unoccupied a 55 mph



CLIENTE	CIRQUE ITALIA PARANORMAL
CONTENUTO	CIRCO Ø40 mt a castello punte esterne
RIF.	
COD.374	
DISEGNO	
IP. 06	
DATA	00/00/00

A

Certificate of Achievement
This is to certify that

Darya Artsyman

has completed the course
Crowd Management Training

Crowd Manager Training (2022/2023)



Y47Gb7iiwR
Date Issued: June 7, 2023
Certificate is valid for two years from date issued.



Certificate of Achievement
This is to certify that

Julio Cesar España
has completed the course
Crowd Management Training

Crowd Manager Training (2022/2023)



mHds71Bvt

Date Issued: June 7, 2023

Certificate is valid for two years from date issued.



Certificate of Achievement
This is to certify that

Alejandro Hernandez
has completed the course
Crowd Management Training

Crowd Manager Training (2022/2023)



dUciIXvAAQG

Date Issued: June 7, 2023

Certificate is valid for two years from date issued.



Certificate of Achievement
This is to certify that

Libra Portugal

has completed the course
Crowd Management Training

Crowd Manager Training (2022/2023)



XAYSE2K07A

Date Issued: June 7, 2023

Certificate is valid for two years from date issued.

