

Permit #

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*** BUSINESS OR ORGANIZATION NAME**

Orland Park Lions Club

*** BUSINESS OR ORGANIZATION NAME ADDRESS**

P.O. Box 604
Orland Park IL 60462

*** PHONE #**

(312) 402-4265

*** EMAIL**

lieserkris@gmail.com

*** CONTACT PERSON**

Krista Lieser

*** CONTACT PERSON ADDRESS**

7444 W 153rd St
Unit 2
Orland Park IL 60462

*** PHONE #**

(312) 402-4265

*** EMAIL**

lieserkris@gmail.com

*** CHAIRPERSON OF SPECIAL EVENT**

Krista Lieser

*** CHAIRPERSON ADDRESS**

7444 W 153rd St
Unit 2
Orland Park IL 60462

*** PHONE #**

(312) 402-4265

*** EMAIL**

lieserkris@gmail.com

*** EVENT DAY CONTACT PERSON**

Krista Lieser

*** EVENT DAY CONTACT PERSON ADDRESS**

7444 W 153rd St
Unit 2
Orland Park IL 60462

*** PHONE #**

(312) 402-4265

*** EVENT DAY CONTACT PERSON EMAIL**

lieserkris@gmail.com

*** LOCATION AND ADDRESS OF EVENT**

14700 Ravinia Ave Orland Park, IL 60462

*** TYPE OF EVENT:**

Orland Park Lions Club annual Christmas Tree fundraiser

*** EVENT ON PUBLIC PROPERTY**

VILLAGE GREEN

*** EVENT ON PRIVATE PROPERTY**

OUTDOOR SALES - PER DAY

*** DESCRIPTION OF EVENT**

Christmas tree sale fundraiser for Orland Park Lions Club

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

11/14/25 drop trailer to set up lot. 11/15/25 set up fencing and port a potty delivered. 11/22/25 trees delivered. 11/22-11/23/25 setting up trees. 11/24/25 sales begin. 12/20/25 take down lot unless we sell out before this date. Sales begin 11/24/25 hours for sales: weekdays 4-7pm. Saturdays 9-6pm Sundays 10-4pm 11/27 thanksgiving closed 11/28/25 Friday after thanksgiving 10-6pm. We will close early day of village parade (date of parade unknown at this time. We will likely close at 2pm)

*** SET-UP DATE & TIME**

11/14/2025 12:00 PM

*** TEAR-DOWN DATE & TIME**

12/20/2025 9:00 AM

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

Number of people will vary from day to day

(Additional Fees May Apply)

*** WILL FOOD BE SERVED?**

NO

*** 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 #

(312) 402-4265

EMAIL

lieserkris@gmail.com

*** WILL GENERATORS BE UTILIZED?**

NO

If YES, please describe the size/type:

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

NO

PHONE #

(312) 402-4265

EMAIL

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

NO

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

YES

*** WILL THERE BE A TENT?**

NO

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

YES

If YES, list structures:

3 trailers. One sales trailer and one storage trailer at site of event. One storage trailer held near baseball field

*** 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.)

N/A

Attachment
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2. The approximate number of persons who, and animals and vehicles which, will constitute the event, types of animals, and description of the vehicles.
Customers vehicles will park as they come in. No animals will be used at this event.

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

Sales weekdays 4-7pm Saturdays 9-6 pm. Sundays 10-4pm. 11/27 closed for thanksgiving. 11/28 Friday after thanksgiving 10-6pm

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.

No streets will be used

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

Village parking lot

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

Lot to be assembled 11/15/25

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

* **APPLICANT NAME**

Orland Park Lions Club annual Christmas

* **DATE**

06/08/2025

* 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.