

Permit #

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*** BUSINESS OR ORGANIZATION NAME**

Orland Park Lions Club

*** BUSINESS OR ORGANIZATION NAME ADDRESS**

Orland Park Lions Club

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**

Krista Lieser

7444 W 153rd t

Orland Park IL 60462

*** PHONE #**

(312) 402-4265

*** EMAIL**

Lieserkris@gmail.com

*** EVENT DAY CONTACT PERSON**

Krista Lieser

*** EVENT DAY CONTACT PERSON ADDRESS**

Krista Lieser

7444 w 153rd st

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 sales

*** EVENT ON PUBLIC PROPERTY**

ALL OTHER VILLAGE PROPERTY RENTALS

*** EVENT ON PRIVATE PROPERTY**

OUTDOOR SALES - PER DAY

*** DESCRIPTION OF EVENT**

Annual Orland Park Lions fundraiser-Christmas tree sales

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

11/15/24 supply trailer and port a potty delivered. 11/16/24 set up tree lot. 11/23/24 tree delivery 9AM. 11/25/24 tentative tree sales to start. 11/29/24 tree sales to begin for sure. Hours: 11/29/24 9am to 6pm. Mon thru Friday 4 to 7 pm. Sat 9 to 6 pm. Sun 10 to 4 pm. Lot should be closed and cleaned up by 12/30/24.

*** SET-UP DATE & TIME**

11/16/2024 9:00 AM

*** TEAR-DOWN DATE & TIME**

12/30/2024 12:00 AM

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

30

(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

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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.)**

NO

*** WILL THERE BE A TENT?**

NO

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

YES

If YES, list structures:

2 mobile trailers and 1 handicapped port a potty

*** 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.)

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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.

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

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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.

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

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

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

* **APPLICANT NAME**

Orland Park Lions Club

* **DATE**

07/14/2024

* 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.