# 3034-0560

#### Permit #

\*\*SKIPPED\*\*

#### \* BUSINESS OR ORGANIZATION NAME

ORLAND TOWNSHIP

\* BUSINESS OR ORGANIZATION NAME ADDRESS 14807 S RAVINIA AVENUE ORLAND PARK IL 60462

\* PHONE # (708) 403-4222

#### \* EMAIL

LINDSAYT@ORLANDTOWNSHIP.ORG

- \* CONTACT PERSON LINDSAY NAPLETON
- \* CONTACT PERSON ADDRESS 14807 S RAVINIA AVENUE ORLAND PARK IL 60462
- \* PHONE # (708) 403-4222

#### \* EMAIL

LINDSAYT@ORLANDTOWNSHIP.ORG

- \* CHAIRPERSON OF SPECIAL EVENT PAUL O'GRADY
- \* CHAIRPERSON ADDRESS 14807 S RAVINIA AVENUE ORLAND PARK IL 60462
- \* PHONE # (708) 403-4222

#### \* EMAIL

POGRADY@ORLANDTOWNSHIP.ORG

- \* EVENT DAY CONTACT PERSON LINDSAY NAPLETON
- \* EVENT DAY CONTACT PERSON ADDRESS 14807 S RAVINIA AVENUE ORLAND PARK IL 60462
- \* PHONE # (630) 417-5903

#### \* EVENT DAY CONTACT PERSON EMAIL

LINDSAYT@ORLANDTOWNSHIP.ORG

#### \* LOCATION AND ADDRESS OF EVENT

ORLAND TOWNSHIP GROUNDS- 14807 S RAVINIA AVENUE

#### \* TYPE OF EVENT:

PET-PALOOZA: PET PANTRY FUNDRAISER/COMMUNITY EVENT

- \* EVENT ON PUBLIC PROPERTY
  ALL OTHER VILLAGE PROPERTY RENTALS
- \* EVENT ON PRIVATE PROPERTY OUTDOOR EVENT

COMMERCIAL FILMING/PICTURES

#### \* DESCRIPTION OF EVENT

COMMUNITY EVENT WITH VENDORS RELATED TO PET BUSINESSES, SMALL BUSINESSES, PET ADPTIONS. KID GAMES, BOUNE HOUSES, FOOD, AND ENTERTAINMENT. ALL PROCEEDS BENEFIT THE ORLAND TOWNSHIP PET PANTRY

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

SATURDAY, SEPTEMBER 21 12:00-300 PM

#### \* SET-UP DATE & TIME

09/20/2024 12:00 PM

#### \* TEAR-DOWN DATE & TIME

09/21/2024 3:00 PM

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

1000

(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:

GENERATORS FOR BOUNCE HOUSES

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

YES

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.)

YES

\* WILL THERE BE A TENT?

YES

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

YEŞ

#### If YES, list structures:

2 STAGES

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

YES

\* 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.

\*\*SKTPPFD\*

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

12:00-3:00 PM

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.

\*\*SKIPPED\*\*

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

\*\*SKIPPED\*\*

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

\*\*SKIPPED\*\*

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

#### \* APPLICANT NAME

LINDSAY NAPLETON

#### \* DATE

07/09/2024

\* 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.



Hosted by Orland Township Supervisor Paul O'Grady & the Board of Trustees aturday, Sept. 21, 2024 • Noon to 3

Township Grounds at 14807 S. Ravinia Ave., Orland Park • Benefiting the Orland Township Pet Pantry Orland Township residents, along with their furry, four-legged family members, are invited for a day of family fun at the 12th annual Pet-Palooza. Rain or shine, come "paw-ty" at our pet-friendly festival.

# Pet-Palooza will include:

- More than 75 pet-friendly/pet-centered businesses and organizations!
- Pet Adoptions
- Pet products and information

Free samples from local restaurants - many of which have pet-friendly patio areas



- Face painting!
- Inflatable bounce-houses!
- Trackless train rides!
- Princesses, superheroes & other characters!



"Ask the Vet" booth!

Well-

mannered,

leashed &

welcome!

tagged pets

Don't

forget to

bring a

pet food

or cash

to the

Pet Food

Pantry!

"Pet contests with prizes! 2023 SuPETvisor

# **Rover's Rest Zone:**

- Water bowls
- Shade
- **Cooling mist**
- Cooling pools for hot paws
- Live entertainment!
- donation All participating pets should have up-to-date vaccinations.
- **PET-PALOOZA** Owners are responsible for cleaning up after their pets.
  - All pets must be on leashes of six feet or less.
  - · All animals must wear proper tags.

Costumes for pets (and their owners!) are encouraged but not required.

Think you have the next 'SuPETvisor'?

Orland Township residents can nominate their beloved pets to be Orland Township's 'SuPETvisor' of The Year! Learn more here:



Admission is FREE, however a donation of a five-pound bag of pet food or a cash donation to the Orland Township Pet Pantry is strongly encouraged and greatly appreciated. All proceeds benefit the Orland Township Pet Pantry, "Crashy's Closet," which was founded by Supervisor O'Grady and provides pet food and supplies to families in need.

For additional information, including how to become a participating vendor, please call Orland Township at (708) 403-4222

Activities and vendors are added daily, so to keep up-to-date, visit: orlandtownship.org OR facebook.com/orlandtownshippetpalooza

# TOWNSHIP OF ORLAND



Paul A. O'Grady Supervisor

Cindy M. Murray Clerk

Patrick Feldner Maria Sanfilippo John Lynch Michael Maratea Trustees

> Rich E. Kelly Assessor

Antonio Rubino Highway Commissioner

Office Locations

Administrative Office Assessor's Office Youth & Family Counseling Services 14807 S. Ravinia Avenue Orland Park • IL 60462

Main Fax Number (708) 403-4260

Administrative Office & Youth & Family Counseling Services Office Telephone Number (708) 403-4222

> Assessor's Office Telephone Number (708) 403-4712

Highway Department Office 16125 S. Wolf Road Orland Park • IL 60467

> Telephone Number (708) 403-5148

Fax Number (708) 403-5165

www.orlandtownship.org

July 8, 2024

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

Village of Orland Park,

Orland Township hosts its annual Pet-Palooza on the Township grounds each year. The event is designed to benefit the Orland Township Pet Pantry while promoting other local rescues, non-profit organizations, and local businesses. Attendees are encouraged to bring their beloved pets or even bring a new pet home.

This is the Township's largest event we host for the community. As Supervisor of Orland Township, the Pet-Palooza event is approved to occur on the Township's property, which is owned by Orland Township.

For further assistance, please contact Executive Administrator Lindsay Napleton, via email Lindsay T@orlandtownship.org, or via phone 708-403-4222.

7,119

Sincerely,

Supervisor

Paul O'Grady

Orland Township

# **Lindsay Trost**

From:

Village of Orland Park, IL <communications@orlandpark.org>

Sent:

Tuesday, July 9, 2024 10:25 AM

To:

**Lindsay Trost** 

Subject:

\*NEW SUBMISSION\* Special Event Permit Application

CAUTION: This email originated from outside your organization. Exercise caution when opening attachments or clicking links, especially from unknown senders.

# **Special Event Permit Application**

Submission #:

3323719

**IP Address:** 

50.193.117.57

Submission Date: 07/09/2024 10:24 AM

**Survey Time:** 

7 minutes, 30 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**

**ORLAND TOWNSHIP** 

#### **BUSINESS OR ORGANIZATION NAME ADDRESS**

14807 S RAVINIA AVENUE ORLAND PARK, IL 60462

#### **PHONE #**

(708) 403-4222

#### **EMAIL**

LINDSAYT@ORLANDTOWNSHIP.ORG

#### **CONTACT PERSON**

LINDSAY NAPLETON

#### **CONTACT PERSON ADDRESS**

14807 S RAVINIA AVENUE ORLAND PARK, IL 60462

#### **PHONE #**

(708) 403-4222

#### **EMAIL**

LINDSAYT@ORLANDTOWNSHIP.ORG

#### **CHAIRPERSON OF SPECIAL EVENT**

PAUL O'GRADY

#### CHAIRPERSON ADDRESS

14807 S RAVINIA AVENUE

ORLAND PARK, IL 60462

PHONE #

(708) 403-4222

**EMAIL** 

POGRADY@ORLANDTOWNSHIP.ORG

**EVENT DAY CONTACT PERSON** 

LINDSAY NAPLETON

**EVENT DAY CONTACT PERSON ADDRESS** 

14807 S RAVINIA AVENUE ORLAND PARK,IL 60462

**PHONE #** 

(630) 417-5903

**EVENT DAY CONTACT PERSON EMAIL** 

LINDSAYT@ORLANDTOWNSHIP.ORG

**LOCATION AND ADDRESS OF EVENT** 

ORLAND TOWNSHIP GROUNDS- 14807 S RAVINIA AVENUE

TYPE OF EVENT:

PET-PALOOZA: PET PANTRY FUNDRAISER/COMMUNITY EVENT

**EVENT ON PUBLIC PROPERTY** 

ALL OTHER VILLAGE PROPERTY RENTALS

**EVENT ON PRIVATE PROPERTY** 

**OUTDOOR EVENT** 

COMMERCIAL FILMING/PICTURES

**DESCRIPTION OF EVENT** 

COMMUNITY EVENT WITH VENDORS RELATED TO PET BUSINESSES, SMALL BUSINESSES, PET ADPTIONS. KID GAMES, BOUNE HOUSES, FOOD, AND ENTERTAINMENT. ALL PROCEEDS BENEFIT THE ORLAND TOWNSHIP PET PANTRY

LIST DATES OF EVENT WITH HOURS OF OPERATION

SATURDAY, SEPTEMBER 21 12:00-300 PM

**SET-UP DATE & TIME** 

09/20/2024 12:00 PM

**TEAR-DOWN DATE & TIME** 

09/21/2024 3:00 PM

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

1000

(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 #

**FMAIL** 

WILL GENERATORS BE UTILIZED?

YES

If YES, please describe the size/type:

**GENERATORS FOR BOUNCE HOUSES** 

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

YES

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.)

YES

WILL THERE BE A TENT?

YES

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

YES

If YES, list structures:

2 STAGES

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

YES

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

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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.)

#### Attachment

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

12:00-3:00 PM

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

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

#### **APPLICANT NAME**

LINDSAY NAPLETON

DATE

#### 07/09/2024 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.





DEVELOPMENT SERVICES DEPARTMENT
14700 RAVINIA AVENUE
ORLAND PARK, ILLINOIS 60462
708-403-5300

www.orlandpark.org

Date: 7/9/24

To:

Village of Orland Park 14700 Ravinia Are Orland Park IL 60962

RE: Special Event Insurance and Indemnification

#### Dear Vendor:

In connection with your participation in Pet-Palooza ("Event"), maintenance of adequate insurance is a necessary precaution to avoid jeopardizing your, and The Village of Orland Park's operations. In connection with our own insurance program and the operations of the Village, we require all Vendors wishing to participate in the Event to provide evidence of insurance coverages. Therefore, kindly submit to our office a Certificate of Insurance indicating the following coverages and minimum limits. Failure to provide evidence of the following coverages will preclude participation in the Event.

- 1) Workers Compensation and Occupational Disease Insurance in accordance with applicable state and federal laws, and Employer Liability Insurance with a limit of liability of at least \$500,000/\$500,000. The policy must include a Waiver of Subrogation in favor of the Additional Insureds listed in 2) below.
- 2) Commercial General Liability Insurance on an occurrence basis with a combined Bodily Injury and Property Damage limit of at least \$1,000,000 per occurrence and \$2,000,000 general aggregate, and issued by a reputable carrier licensed to do business in the State of Illinois. The policy shall include Products Liability, Broad Form Property Damage, Premises Operations, Contractual Liability and Independent Contractor. The policy shall include an endorsement identifying THE VILLAGE OF ORLAND PARK, its related entities and their respective officers, directors, employees and agents as Additional Insureds (via ISO form CG2026 11/85). Coverage for the Additional Insureds must be Primary and Non-Contributory, and must include a Waiver of Subrogation in favor of the Additional Insureds.
- 3) In the event Automobiles are utilized in any manner in connection with your operations (i.e. deliveries), <u>Comprehensive Automobile Liability Insurance</u> covering use of all owned, non-owned and hired vehicles with Bodily Injury and Property Damage limit of at least \$1,000,000 Combined Single Limit. The policy must include coverage (either by policy terms or by endorsement) for the Additional Insureds for any liability incurred due to your actions with a covered vehicle.
- 4) Excess Liability Insurance on an occurrence basis with a limit of at least \$2,000,000 per occurrence and \$2,000,000 in the aggregate. The policy must be an Umbrella-Follow Form policy and be excess over the coverages listed in A-C above. This coverage may be waived, or limit requirements reduced, but only at the sole discretion of the Village.
- 5) In the event any alcoholic drinks will be sold or served, <u>Liquor Liability Insurance (i.e. Special Events policy)</u>, issued in the names of THE VILLAGE OF ORLAND PARK, its related entities and their respective officers, directors, employees and agents, with limits of at least \$1,000,000 per occurrence must be procured. Alternatively, your own existing Liquor Liability Insurance policy must extend coverage to your operations at the Event and name THE VILLAGE OF ORLAND PARK, its related entities and their respective officers, directors, employees and agents as Additional Insureds on a Primary and Non-Contributory basis.
- 6) Alt Risk Property Insurance, on a replacement cost basis, covering all property (belonging to you, your employees or other third parties), all trade fixtures, equipment, stock, merchandise, and all other items of personal property brought onto, kept at or stored upon Village property in connection with the Event. Said policy shall insure against loss or damage by casualties or causes of whatever kind or nature, and shall contain a Waiver of Subrogation in favor of the Additional Insureds.

TDABRAMO



# CERTIFICATE OF LIABILITY INSURANCE

7/9/2024

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

t	f SUBROGATION IS WAIVED, subject to the this certificate does not confer rights to the cer	tificate holder in lieu of s	uch end	orsement(s)				
	ODUCER			⊺ Talia D'A		FAX		
Alliant Insurance Services, Inc. 353 N Clark St 11th Fl Chicago, IL 60654			PHONE (A/C, No, Ext): (949) 242-6273 E-MAIL ADDRESS: Talia.DAbramo@alliant.com			FAX (A/C, No):		
CII	icago, 12 00004		ADDRES			RDING COVERAGE		NAIC #
			INSURE			Risk Management Trus	st	00000
INS	URED		INSURE			•		
	Orland Township		INSURE					
	14807 Ravinia Avenue		INSURE					
	Orland Park, IL 60462		INSURE					
			INSURER	RF:				
CC	OVERAGES CERTIFICAT	E NUMBER:				REVISION NUMBER:		
	FHIS IS TO CERTIFY THAT THE POLICIES OF IN NDICATED. NOTWITHSTANDING ANY REQUIREN CERTIFICATE MAY BE ISSUED OR MAY PERTAIN EXCLUSIONS AND CONDITIONS OF SUCH POLICIES	MENT, TERM OR CONDITIC N. THE INSURANCE AFFOR	ON OF AN	NY CONTRAC THE POLICI	CT OR OTHEF IES DESCRIE	R DOCUMENT WITH RESPE BED HEREIN IS SUBJECT T	ECT T	O WHICH THIS
INSF	ADDL SUB			POLICY EFF MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	s	
A						EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR	P5-1000261-2324-01		12/1/2023	12/1/2024	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	50,000
						MED EXP (Any one person)	\$	1,000
					PERSONAL & ADV INJURY	\$	1,000,000	
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	\$	3,000,000
	X POLICY PRO-					PRODUCTS - COMP/OP AGG	\$	3,000,000
	OTHER:					COMBINED CINCLE LIMIT	\$	4 000 000
Α	AUTOMOBILE LIABILITY					COMBINED SINGLE LIMIT (Ea accident)	\$	1,000,000
	X ANY AUTO	P5-1000261-2324-01		12/1/2023	12/1/2024	BODILY (NJURY (Per person)	\$	
	OWNED AUTOS ONLY SCHEDULED AUTOS	ļ				BODILY INJURY (Per accident)	\$	
	X HIRED ONLY X NON-OWNED					PROPERTY DAMAGE (Per accident)	\$	
			_	1			\$	5,000,000
Α	OMBREZZE/CZ/KB	P5-1000261-2324-01		12/1/2023	12/1/2024	EACH OCCURRENCE	5	5,000,000
	X EXCESS LIAB CLAIMS-MADE	3-1000201-2324-01		TE/T/LUZU	12,1,2021	AGGREGATE	\$	0,000,000
-	DED RETENTION \$					PER OTH-	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						\$	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? N / A (Mandatory in NH)					E.L. EACH ACCIDENT	•	
	If yes, describe under					E.L. DISEASE - EA EMPLOYEE  E.L. DISEASE - POLICY LIMIT		
	DÉSCRIPTION OF OPERATIONS below					E.L. DISEASE - POLICY LIMIT	Φ	
DES	SCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACOR	D 101. Additional Remarks Schedi	ule. mav be	attached if more	e space is requi	red)		
	Pet-Palooza	,				,		
Villa	age of Orland Park is named as an additional insu	red on General Liability in	surance	coverage wh	en required	by written contract or agr	eeme	nt.
		,		J	•	,		
CE	RTIFICATE HOLDER		CANC	ELLATION				
	Village of Orland Park 14700 Ravinia Avenue		THE	EXPIRATION	DATE TH	ESCRIBED POLICIES BE CA REREOF, NOTICE WILL E BY PROVISIONS.	ANCE BE D	LLED BEFORE ELIVERED IN
	Orland Park, IL 60462		AUTHORIZED REPRESENTATIVE					



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.	30 x 60	NORTH PARKING LOT (FOOD PANTRY PARKING LOT)	
2.	20 x 20	EAST PARKING LOT	
3.	20 x 60	SOUTH PARKING LOT	
4.	20 x 30	SOUTH PARKING LOT	
5.	-		
Lindsay Napleton Applicant Printed Name		1/0/10/100 100/04 10/1	7/9/24 Date



DEVELOPMENT SERVICES DEPARTMENT 14700 RAVINIA AVENUE ORLAND PARK, ILLINOIS 60462 708-403-5300

www.orlandpark.org

# **Canopy / Tent Fire Code Requirements**

### Below are the Code sections from the 2006 International Fire Code for reference only.

2403.8.1 Access. Fire apparatus access roads shall be provided in accordance with Section 503.

**2403.8.2 Location.** Tents, canopies or membrane structures shall not be located within 20 feet (6096 mm) of lot lines, buildings, other tents, canopies or membrane structures, parked vehicles or internal combustion engines. For the purpose of determining required distances, support ropes and guy wires shall be considered as part of the temporary membrane structure, tent or canopy.

- 2. Membrane structures, tents or canopies need not be separated from buildings when all of the following conditions are met:
  - 2.1. The aggregate floor area of the membrane structure, tent or canopy shall not exceed 10,000 square feet (929 m2).
  - 2.2. The aggregate floor area of the building and membrane structure, tent or canopy shall not exceed the allowable floor area including increases as ated in the *International Building Code*.
    - 2.3. Required means of egress provisions are provided for both the building and the membrane structure, tent or canopy, including travel distances.
    - 2.4. Fire apparatus access roads are provided in accordance with Section 503.

**2403.9** Anchorage required. Tents, canopies or membrane structures and their appurtenances shall be adequately roped, braced and anchored to withstand the elements of weather and prevent against collapsing. Documentation of structural stability shall be furnished to the fire code official on request.

2403.12.5 Aisle. The width of aisles without fixed seating shall be in accordance with the following:

- 1. In areas serving employees only, the minimum aisle width shall be 24 inches (610 mm) but not less than the width required by the number of employees served.
- 2. In public areas, smooth-surfaced, unobstructed aisles having a minimum width of not less than 44 inches
- (1118 mm) shall be provided from scating areas, and aisles shall be progressively increased in width to provide, at all points, not less than 1 foot (305 mm) of aisle width for each 50 persons served by such aisle at that point.

**2403.12.6** Exit signs. Exits shall be clearly marked. Exit signs shall be installed at required exit doorways and where otherwise necessary to indicate clearly the direction of egress when the exit serves an occupant load of 50 or more.

**2403.12.6.1 Exit sign illumination.** Exit signs shall be of an approved self-luminous type or shall be internally or externally illuminated by luminaires supplied in the following manner:

- 1. Two separate circuits, one of which shall be separate from all other circuits, for occupant loads of 300 or less; or
- 2. Two separate sources of power, one of which shall be an approved emergency system, shall be provided when the occupant load exceeds 300. Emergency systems shall be supplied from storage batteries or from the on-site generator set, and the system shall be installed in accordance with the ICC Electrical Code.

2404.3 Label. Membrane structures, tents or canopies shall have a permanently affixed label bearing the identification of size and fabric or material type.

**2404.4 Certification.** An affidavit or affirmation shall be submitted to the fire code official and a copy retained on the premises on which the tent or air-supported structure is located. The affidavit shall attest to the following information relative to the flame propagation performance criteria of the fabric:

- 1. Names and address of the owners of the tent, canopy or air-supported structure.
- 2. Date the fabric was last treated with flame-retardant solution.
- 3. Trade name or kind of chemical used in treatment.
- 4. Name of person or firm treating the material.
- 5. Name of testing agency and test standard by which the fabric was tested.

**2404.6 Smoking.** Smoking shall not be permitted in tents, canopies or membrane structures. Approved "No Smoking" signs shall be conspicuously posted in accordance with Section 310.

**2404.7 Open or exposed flame.** Open flame or other devices emitting flame, fire or heat or any flammable or combustible liquids, gas, charcoal or other cooking device or any other unapproved devices shall not be permitted inside or located within 20 feet (6096 mm) of the tent, canopy or membrane structures while open to the public unless approved by the fire code official.

2404.11 Clearance. There shall be a minimum clearance of at least 3 feet (914 mm) between the fabric envelope and all contents located inside the tent or membrane structure.

2404.12 Portable fire extinguishers. Portable fire extinguishers shall be provided as required by Section 906.

2404.15.6 Outdoor cooking. Outdoor cooking that produces sparks or grease-laden vapors shall not be performed within 20 feet (6096 mm) of a tent, canopy or membrane structure unless approved by the Fire Code Official.





PERMIT # \_\_\_\_\_

DEVELOPMENT SERVICES DEPARTMENT 14700 RAVINIA AVENUE ORLAND PARK, ILLINOIS 60462 708-403-5300

www.orlandpark.org

# 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.

100u, and merchandise service/sale, and proposed street/sidewalk closures.	
■Will your event include the use of <b>PORTABLE TOILETS?</b>	
The Village recommends two portable toilets, one handicapped stall, and two hand-washing stations per 100 portable toilets must be removed from Village property within 24 hours after your event.  Company Name: PERFECT POTTY  Phone # 815-464-9433	people. All
Number of Portable Toilets: 4 Number of Handicapped Stalls: 1 Number of Hand-Washing Stati	ions 1 DUAL
□Will your event include the use of <b>DUMPSTERS on village property?</b>	
The Village requires that all areas must be clean of debris. Attach plan of how garbage and waste will be removed within 24 hours after your event.	
Waste Company Name:	
Number of Dumpsters:	
■Will your event include the installation of <b>FENCING or OTHER STRUCTURES?</b> Description(s): SNOW FENCE ALONG GRASS AREA OF RAVINIA	
■Will your event be publicly advertised?	
How will your event attendees be notified or invited to the event? NEWSPAPER, SOCIAL MEDIA, OUTDOOR	R BANNER
■If your event is requesting a <b>street or sidewalk closure</b> , attach map noting what type of traffic control device traffic signal, Police, barricades, specialized equipment, cones or signs) will be used to close the area. Also not the signal of the sign	•
will be any control fencing. No markings on paths are allowed. Signage must be used and removed.	
□ If your event is a <b>run</b> , <b>walk</b> , or other activity in which participants will be following a course, then you must a and a written description of the proposed route. Additionally, the Village is not responsible for any costs associate denial of a proposed route.	-
➡Have you made provisions for <b>onsite security</b> services? Any event requiring the use of the Orland Park Po	lice
Department will be billed per officer per hour. For more information, contact the Police Department at (708) 34 for the Patrol Commander.	
Depending on the size and activities of your proposed event, The Village of Orland Park may require the presence security personnel. Event organizers are responsible for the actions and conduct of any and all persons and of (participants, spectators, sponsoring organization, its Officers, Employees or agents or any person under their insofar as permitted by law) associated with the permitted event. Furthermore, the event organizer is responsitively all costs related to policing, cleaning, and restoring the park upon conclusion of the event or activity are reimburse the Village for any such costs incurred by the Village.	rganizations r control ible for and
LINDSAY NAPLETON  NAME OF APPLICANT (please print)  SIGNATURE OF APPLICANT  DAT	



ORLAND TOWNSHIP

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DEVELOPMENT SERVICES DEPARTMENT
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7/9/24

# SPECIAL EVENT ON VILLAGE PROPERTY Hold Harmless Agreement

To the fullest extent permitted by law, Vendor shall defend, indemnify and hold harmless THE VILLAGE OF ORLAND PARK, its related entities, and each of their respective officers, directors, employees and agents ("Indemnitees"), from and against all claims, damages, losses, costs, expenses, judgments and liabilities (including but not limited to attorney's fees, costs and expenses), that may be asserted against or incurred by any of them due to: (a) any real or personal property damage relating to Vendor's occupancy of the Indemnitees' property or any portion thereof, or Vendor's participation of the Event; (b) any accident or injury (including but not limited to personal injury and bodily injury) to any persons (including Vendor's employees), sickness, disease or death, or to injury or destruction of tangible personal property, including the loss of use thereof, caused by or in connection with: (i) the performance of any services or the furnishing of any goods, materials, food, beverages or other property upon the indemnitees' property by Vendor; or (ii) any negligent act or omission of the Vendor, its employees, contractors or subcontractors, anyone directly or indirectly employed by them or anyone for whose acts any of them and/or (c) any claim, ruling, and/or decision by any local state and/or federal agency or court that the Indemnitees must pay any tax or any kind because of a ruling that Vendor and/or its employees are employees of the Indemnitees, all regardless of whether or not any such claim, damage, loss, cost, expense, judgment or liability it is caused in part by a party indemnified hereunder.

If Vendor suffers any claims, damages or losses caused by any person or entity engaged by or through or for the benefit of the Indemnitees or any other person or entity, Vendor shall not hold or seek to hold the Indemnitees responsible therefore, but rather, Vendor shall proceed solely against such person or entity causing such claim, damage or loss.

In the event such indemnity as described above is prohibited by law, then said indemnity shall only be to the extent caused by the negligent acts or omissions of the Vendor, its agents and employees, anyone directly or indirectly employed by any of them, or anyone for whose acts any of them may be liable, or to the greatest extend allowed by law.

Vendor's defense and indemnification obligations set forth in the Letter Agreement shall survive the expiration or termination of the Event.

	Accepted and Agreed:	
rinted Name of Vendor LINDSAY Naple		Date
MMMUlaydton - Admin ignature of Venddr	istrator	
	Building Event Official	
	Permit #:	Date

# TOWNSHIP OF ORLAND



Paul A. O'Grady Supervisor

Cindy M. Murray Clerk

**Patrick Feldner** Maria Sanfilippo John Lynch **Michael Maratea** Trustees

> Rich E. Kelly Assessor

Antonio Rubino Highway Commissioner

Office Locations

**Administrative Office** Assessor's Office Youth & Family **Counseling Services** 14807 S. Ravinia Avenue Orland Park • IL 60462

> Main Fax Number (708) 403-4260

**Administrative Office &** Youth & Family Counseling **Services Office** Telephone Number (708) 403-4222

> Assessor's Office Telephone Number (708) 403-4712

**Highway Department Office** 16125 S. Wolf Road Orland Park • IL 60467

> Telephone Number (708) 403-5148

Fax Number (708) 403-5165

www.orlandtownship.org

July 15, 2024

Village Clerk Patrick R. O'Sullivan Village of Orland Park 14700 South Ravinia Avenue Orland Park, IL 60462

Dear Clerk O'Sullivan:

Along with the application for a license to sell raffle tickets at our Pet-Palooza, the Orland Township Board submits this letter in response to the fidelity bond requirement.

The Orland Township Board unanimously voted in favor of waiving the fidelity bond. We are aware of the risks involved, but we agreed that the prize values are not extreme enough to warrant a bond.

If you have any questions, please contact Lindsay Napleton at (708) 403-4222.

Sincerely,

Paul O'Grady Supervisor

Cindy Murray

Clerk

Patrick Feldner

Trustee

Trustee

Maria Sanfilippo

Trustee

Michael Maratea Musen Manc

Year: 2024

# VILLAGE OF ORLAND PARK 14700 RAVINIA AVENUE ORLAND PARK, IL 60462

# APPLICATION FOR LICENSE TO SELL RAFFLE TICKETS

(This is a three-page application)

(To be co	mpleted by Village staff)				
Date Approved:					
Date Denied:					
Approval:	Village Manager				
Expires:					
	VED APPLICATION VES AS LICENSE				

PLEASE NOTE: Any misrepresentation or falsification of the information sought below may result in revocation of the License as granted. Applications must be submitted at least 30 days prior to the raffle date requested. For information or questions, please call (708) 403-6150. **Each license is valid for not more than 1 raffle per week during any 1 year period.** 

	or o that I ray to per wood all ring any I goal person.		
	DERSIGNED ORGANIZATION OFFICERS NS SUBMITTING APPLICATION)		
DATE OF APPLICATION:	7/16/24		
PRESIDENT OR PRESIDING OFFICER:	PAUL O'GRADY		
SECRETARY:	CINDY MURRAY		
ADDRESS OF APPLICANT:	14807 S. RAVINIA AVENUE		
	ORLAND PARK, IL 60462		
SPONSORING ORGANIZATION REQUESTING LICENSE:	ORLAND TOWNSHIP		
ADDRESS OF SPONSORING ORGANIZATION:	14807 S. RAVINIA AVENUE		
	ORLAND PARK, IL 60462		
OF KAFFLE	LINDSAY NAPLETON		
MANAGER:	14807 S. RAVINIA AVENUE		
1	PHONE 708-403-4222		
ADDRESS OF PLACE(S) OR AREA(S) W	HERE CHANCES ARE TO BE SOLD OR ISSUED:		
14807 S. RAVINIA AVENUE, ORL	AND PARK		
PURPOSE OF RAFFLE: 12TH ANNU	AL PET-PALOOZA FUNDRAISER TO BENEFIT		
ORLAND TOWNSHIP PET PANTRY	- RAFFLE BASKETS AND/OR GIFT CARDS, 50/50		
TIME PERIOD WHICH RAFFLE CHANCES	WILL BE SOLD OR ISSUED: 12-3 P.M.		
MAXIMUM NUMBER OF RAFFLE CHANCE			
	PRIZE VALUE: \$15-\$125 SINGLE PRIZE: 50/50 SPLIT THE POT		
54195_1 RAFFLE BASKETS			

#### TIME, DATE AND LOCATION WHERE WINNING RAFFLE CHANCE WILL BE DETERMINED:

3:00 P.M.

9/21/24

14807 S. RAVINIA AVENUE, ORLAND PARK

Time

Date

Location of Raffle Drawing (Address, City, State)

# CHECK TYPE OF NON-PROFIT ORGANIZATION AND ATTACH DOCUMENTATION

Religious	Charitable	Labor	Fraternal	Business
Educational	Veterans' Orga	anization	Law Enforce	ement Agency/ Association
*Non-Profit Fund	Raising TOWNSH	IP GOVERNMEI	NT	
	rganized solely to raise f of illness, disability, acc		al or group of ind	ividuals suffering extreme financial
LENGTH OF TIN	ME ORGANIZATIO	N HAS BEEN IN I	EXISTENCE:	150 YEARS
PLACE AND DA	ΓE OF INCORPORA	ATION OF ORGA	NIZATION:	IL, COOK COUNTY
IF NOT A CORPO	ORATION, STATE	WHEN AND HOV	ORGANIZEI	D:
TOWNSHIP G	OVERNMENT			
NUMBER OF ME	MBERS OF ORGA	NIZATION THAT	RESIDE IN V	TILLAGE: POSSIBLY 10
AUTHORIZED A ANY THIRD PAR CONTRACTED I ENSURING THA	GENT, E-MAIL AD RTY ORGANIZATION BY THE ORGANIZA	DRESS FOR PRII ON ("THIRD PAR ATION (RAFFLE CONTRACTED PA	MARY CONTA TY RAFFLE O MANAGERS A ARTIES COME	PRIMARY CONTACT AND ACT, TELEPHONE NUMBER OF DPERATOR/ VENDOR") ARE RESPONSIBLE FOR PLY WITH ALL APPLICABLE
ordinance of the	Village of Orland Pa	ark Amending Title	e 7, Chapter 1	Ordinance #5550 entitled "An 6 (Raffles) of the Orland Park prospective license organization.
understand that v		inance are subject	t to fines of not	Ordinance #5550 and tless than one-hundred dollars 0) per violation.
President or Presiding Office		RADY or Print Name		
Signature:	Paul	O Lindy		

ATTEST:		
Secretary:	CINDY MURRAY	_
Signature:	Type or Print Name	_
ATTEST:		
Third Party Operator/Vendor:	Type or Print Name	
Signature:		
SUBSCRIBED AND	SWORN TO	
before me this		
day of (Notary Pu	, 20 <u>2</u> .	OFFICIAL SEAL SHEILA MCGOWAN NOTARY PUBLIC, STATE OF ILLINOIS MY COMMISSION EXPIRES April 28, 2027
Commission Expires:	4/18/2+	

/as 11/18



# **DEVELOPMENT SERVICES DEPARTMENT**

14700 RAVINIA AVENUE ORLAND PARK, ILLINOIS 60462 (708) 403-5300

www.orlandpark.org

DATE RECEIVED:	
PFRMIT #·	

# APPLICATION FOR TEMPORARY SIGN PERMIT

APPLICANT INFORMATION	
Applicant Name: LINDSAY NAPLETON	Phone Number: 708-403-4222
Company: ORLAND TOWNSHIP	Email: LINDSAYT@ORLANDTOWNSHIP.ORG
SITE INFORMATION	
Business/Site Name: ORLAND TOWNSHIP	Phone Number: 708-403-4222
Address: 14807 S RAVINIA AVENUE, ORLAND PARK	Email: LINDSAYT@ORLANDTOWNSHIP.ORG
Business Owner: PAUL O'GRADY	Phone Number: 708-403-4222
Property Owner: PAUL O'GRADY	Phone Number:
CONTRACTOR INFORMATION OFFICE USE ONLY: CL:	BOND EXP:
Sign Contractor: N/A	Phone Number: N/A
Address: N/A	Email: N/A
Duration of Display: Start Date: 08/01/2024 End Date: Sign Text: PET-PALOOZA, SATURDAY, SEPT. 21, 2024 NOON TO 3 PM	09/23/2024 Total Days: 53
Sign Materials: CHLOROPLAST	Sign Colors: MULTIPLE
Sign Location: □ Wall 😿 Ground	Estimated Cost:
Sign Type:   Banner   Inflatable   Dual Post	Quantity of Signs: 1
Sign Length: 8 FT Sign Height: 4 FT	Sign Face Area:
Tenant Type: □ Residential ☑ Non-Residential □ Vacant Land	Tenant Frontage (ft):
Submittal requirements:  One (1) color copy of the fully-dimensioned Sign Plan.  An aerial image, Plat of Survey, and/or Site Plan with the propos  A copy of written consent from the owner of the building or land	
The Applicant hereby certifies the correctness and completeness of this c with all applicable Village regulations (including Section 6-307 (Sign installed in accordance with the approved plans.	
Applicant Signature:	Date: 07/12/2024
OFFICE USE ONLY: ☐ Application Complete ☐ Verify Occupancy ☐ Appr	oval: Fee:





Permit#

DEVELOPMENT SERVICES DEPARTMENT 14700 RAVINIA AVENUE ORLAND PARK, ILLINOIS 60462 708-403-5300

www.orlandpark.org

# **TEMPORARY FOOD SERVICE PERMIT APPLICATION**

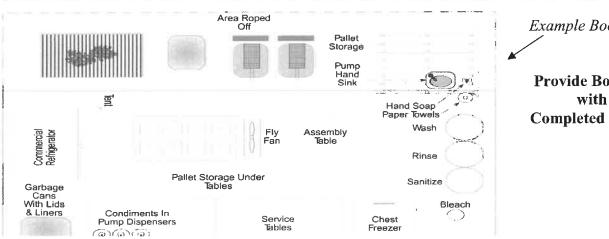
Event Informati	on	To the Visit	Δn	plication Da	ito:		
Event Name: PE			- Ap	oncadon Da	ic.		
Location: 14807		VENUE ORI	AND PARK, IL 6	60462			
Set Up Date:9/2			Time: 9 AM		Times:	12-3 PM	
Event Dates: S				Inding: 9	/ 21	1 24 1	
Will be at this lo						days, list dates here:	
Date:	Date:		Date:	Date:		Date:	
*This permit is only	y good for on	e location, f	or a maximum	of the fourteer	ı (14) day:	s listed above.	
<b>Vendor Informa</b>	ition	1-1-1-1					
Organization/B	usiness Na	me: ORLAN	ND TOWNSHIP				
Address: 14807	S RAVINIA AV	/ENUE					
City: ORLAND PA	RK		Sta	State: L Zip Code: 604			
Phone#: 708-403-	-4222		Illir	Illinois State Tax ID#: 36-2779637			
<b>Organization C</b>	hairperson	/Business	Owner				
Name: PAUL O'GRADY				one#: 708-403	3-4222		
For vendors usin	g multiple b	ooths note	Booth #:				
Appl	icant's Sig	nature	H-PA-PAN W		Printed	Name	
lindray	lapleton	-		LINDS	AY N	APLETON	
Health II	nspector's	Signature			Printed	Name	
, roalett i	1000001	O I g i lo cui i					
approve menu ar	nd booth qu	estionnaire	e before a per	mit can be is:	sued.	vent. Sanitarian must	
For Office Use O		- 1987 HW		Para la			
Permit Type:		ood Festiv	al 🗆 S	School		☐ Other	
San ID #:			Ris	k Type:			

Date Issued:

Menu and Procedure Review				
Food to be Prepared	Supplier Information	Process of Transportation/Preparation to Event		
i.e. Hamburger	Gordon's Food Service Sysco	Transported in insulated container, held in commercial freezer, cooked on site to serve		
i.e. Cooked Rice		Made at restaurant, transported in insulated container and held at steam table		
	VARIETY OF LOCAL RESTAURANTS	LOCAL RESTAURANTS PREPARE AND COOK DONATED FOOD FOR EVENT		
		FINAL DETAILS WILL BE CONFIRMED WEEK OF EVENT		

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

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



Example Booth Layout

**Provide Booth Layout** with your **Completed Application**