From:	Village of Orland Park, IL
To:	Ray Piattoni; Greg Bruggeman; Vincent Doria; Tiffany Cooper; Jennifer Farrell; Suzanne Koleno
Subject:	[*Suspicious Email*] *NEW SUBMISSION* Special Event Permit Application
Date:	Thursday, March 19, 2026 11:32:44 AM

[External Mail] Use caution with links and attachments.

Special Event Permit Application

Submission #:	4698434
IP Address:	50.231.24.186
Submission Date:	03/19/2026 11:32
Survey Time:	7 minutes, 37 seconds

You have a new online form submission.
Note: all answers displaying "*****" are marked as sensitive and must be viewed after your login.

Permit #

BUSINESS OR ORGANIZATION NAME

Orland Square

BUSINESS OR ORGANIZATION NAME ADDRESS

288 Orland Square
Orland Park, IL 60462

PHONE #

(708) 349-1647

EMAIL

cathy.mein@simon.com

CONTACT PERSON

Cathy Mein

CONTACT PERSON ADDRESS

288 Orland Square
Orland Park, IL 60462

PHONE #

(708) 349-1647

EMAIL

cathy.mein@simon.com

CHAIRPERSON OF SPECIAL EVENT

Cathy Mein

CHAIRPERSON ADDRESS

288 Orland Square
Orland Park, IL 60462

PHONE #

(708) 349-1647

EMAIL

cathy.mein@simon.com

EVENT DAY CONTACT PERSON

Cathy Mein

EVENT DAY CONTACT PERSON ADDRESS

288 Orland Square
Orland Park, IL 60462

PHONE #

(708) 349-1647

EVENT DAY CONTACT PERSON EMAIL

cathy.mein@simon.com

LOCATION AND ADDRESS OF EVENT

Orland Square Mall: 288 Orland Square Drive, Orland Park IL. Center Court.

TYPE OF EVENT:

VIP Experience

EVENT ON PUBLIC PROPERTY

ALL OTHER VILLAGE PROPERTY RENTALS

EVENT ON PRIVATE PROPERTY

ALL OTHER VILLAGE PROPERTY RENTALS

COMMERCIAL FILMING/PICTURES

NON-COMMERCIAL FILMING/PICTURES ON PUBLIC PROPERTY

Section Break

DESCRIPTION OF EVENT

In honor of Orland Square's 50th anniversary, shoppers who spend $250 at any retailers the morning of 5/2 will show receipts and receive access to a special VIP experience with chair massage, make your own fragrance area, logo give-aways, craft, etc.

LIST DATES OF EVENT WITH HOURS OF OPERATION

5/2/26, 12p-4p

SET-UP DATE & TIME

05/02/2026 10:00 AM

TEAR-DOWN DATE & TIME

05/02/2026 04:00 PM

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

100

(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

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(708) 349-1647

EMAIL

cathy.mein@simon.com

WILL GENERATORS BE UTILIZED?

NO

If YES, please describe the size/type:

n/a

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

NO

PHONE #

(708) 349-1647

EMAIL

cathy.mein@simon.com

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.)

NO

If YES, list structures:

n/a

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

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

animals, and description of the vehicles.

n/a

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

12p-4p

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

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

Cathy Mein

DATE

03/19/2026 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.