Village of Pecatonica 405 Main Street PO Box 730 Pecatonica, Il 61063



## INSTRUCTIONS FOR COMPLETING THE STREET CLOSURE APPLICATION

- 1. <u>Completed application for all street closures must be submitted at least 60 days prior to the Event.</u>
- 2. Careful completion of the form will help to avoid delays in processing. It is important that you follow the instructions and provide clear and accurate information.
- 3. Submit all necessary documents with the application.
- 4. The following sections **MUST** be completed by the event coordinator for **ALL** events:
  - General event information
  - Site plan with clearly marked maps (geography of area, street closures, barricades, tents, stage, food trucks, any obstacles)
  - Presentation to the Economic Development Committee 60 days prior to the event (Economic Development meetings are the second Monday of each month check Village website)
  - Submission of insurance and liability certificate information listing the Village of Pecatonica as additional insured.
  - Request in writing for additional police coverage.
  - Contact information for at least two event coordinators.
  - Signature of event organizer
  - Organization is responsible for Clean up after the event. Your organization may be charge a clean-up fee if this is not completed.
  - Organization is required to provide follow-up to committee within 60 days after event.
  - Please contact Village Hall at 815-239-2310 with any questions.

## REQUEST FOR STREET CLOSURE

Submission Date:	Requesting Organization:				
	Date and Time of Closing: Purpose:				
	Cor	ntact Information			
1,					
Name:					
Home Phone	Cell Phone				
Address					
City	State.		ZIP Code		
Email Address					
2.	7				
Name:					
Home Phone	Cell Phone				
Address					
City	State.		ZIP Code		
Email Address	_				
Insurance Information:		Contact:			
	-		surance listing the Village as nsured must be attached		
Additional Police Needed:		Public Works Request:			
Banner Requested	3/				

Received in office Date	Required Meeting Date	Approval Date

Please indicate below (us	se additional pages if ne	cessary) what	street closu	es are being requested	i.
street Name:		between		and	_
Date:	Time: Starting _		Ending		
street Name:		between		and	_
Date:	Time: Starting _		Ending		
street Name:		between		and	_
Pate:	Time: Starting _		Ending		
treet Name:		between		and	_
ate:	Time: Starting _		Ending		
treet Name:		between		and	_
ate:	Time: Starting _		Ending		
		5-6			
There will be a clear	an-up fee charge to your	organization	if clean-up is	not completed by your	group
ignature:				_ Date:	
A MONTH OF THE STATE OF		7 11			d

Required Meeting Date

Approval Date

Received in office Date



## STREET CLOSURE APPLICATION CHECKLIST

Done?	Name
	Signed and Dated your application
	Attached your event site map with clearly marked street closures, barricades, course routes, tents, stage, food trucks, any obstacles, designated smoking/vaping areas 15 feet from the event?
	Provided a certificate of your insurance? \$1,000,000.00 General Liability Attached?
	Completed application with contact information
	Provided samples of communications that will be distributed to impacted residents, businesses, schools, places of worship, and other entities, if applicable?
	Attached a copy of your IRS 501 tax exemption letter and letter of intent from participating nonprofit, if applicable?
	Included your Special Event Liquor License application, Dram Shop Insurance, if applicable?
	Included your completed Banner (temporary sign) if applicable?
	Organization is responsible for Clean up after the event. Your organization may be charge a clean-up fee if this is not completed
	Organization is required to provide follow-up at committee meeting within 60 days of event

## Village of Pecatonica Map of Downtown Streets



2nd Street  Market Street  3rd Street		Municipal Parking	
Reed Street	Main Street	Alley	Washington Street
4th Street  5th Street		Municipal Parking	

\* If your Street Requested is not listed Please provide map.