



# CITY OF ROCK ISLAND

Great River Plaza

## ACTIVITY / EVENT PERMIT

### 1. APPLICANT INFORMATION

NAME (First, Middle Initial, Last)	HOME ADDRESS	CITY	STATE	ZIP CODE
E-MAIL	TELEPHONE NO.	CELL PHONE NO.		

ORGANIZATION NAME	ADDRESS	CITY	STATE	ZIP CODE
E-MAIL	TELEPHONE NO.			

### 2. STATUS OF ORGANIZATION / ACTIVITY PERMIT FEES

**Not For Profit Organization:** \$20.00 application fee per activity / event and \$35.00 permit fee per activity / event.

- A. EDUCATIONAL**     
 **B. FRATERNAL**     
 **C. POLITICAL**  
 **D. CIVIC**     
 **E. RELIGIOUS**     
 **F. OTHER NOT FOR PROFIT**

**For Profit Organization:** \$35.00 application fee per activity / event and \$250.00 permit fee per activity / event.

**Application fee must be paid when application is submitted.**  
**Permit fee is due one week prior to the activity / event.**

### 3. CONTACT PERSON

NAME (FIRST, MIDDLE INITIAL, LAST)	HOME ADDRESS	CITY	STATE	ZIP CODE
E-MAIL	TELEPHONE NO.	CELL PHONE NO.		

### 4. ACTIVITY / EVENT DETAILS

SETUP OF EVENT: (MONTH/DAY/YR)	SET UP BEGINS: (AM/PM)	SET UP ENDS: (AM/PM)

CLEAN UP OF EVENT: (MONTH/DAY/YR)	CLEAN UP BEGINS: (AM/PM)	CLEAN UP ENDS: (AM/PM)

DATE OF EVENT: (MONTH/DAY/YR)	EVENT TIME: EVENT STARTS ( AM/PM )	EVENT TIME: EVENT ENDS (AM/PM)

#### A. TYPE OF ACTIVITY / EVENT

- CONCERT  
  OTHER MUSIC  
  CRAFTS  
  ART SHOW  
  INFORMATION  
 CIRCUS / CARNIVAL  
  ANIMAL SHOW  
  PUBLIC SPEAKERS  
  OTHER \_\_\_\_\_

Name of Activity / Event: \_\_\_\_\_

Number of Attendees expected: \_\_\_\_\_

#### B. LOCATION OF ACTIVITY / EVENT

- PLAZA AREA / WEST  
  PLAZA AREA / EAST  
  STAGE AREA / EAST  
  ARTS ALLEY

Purpose of Event / Activity: \_\_\_\_\_  
\_\_\_\_\_

**C. ITEMS TO BE SOLD OR DISTRIBUTED DURING ACTIVITY / PERMIT**

Indicate the number of vendors, booths, trailers etc. for each and detail their location on the event map

- ALCOHOL # \_\_\_  FOOD # \_\_\_  CRAFTS # \_\_\_  BROCHURES # \_\_\_  OTHER \_\_\_  
 STAGES # \_\_\_

If food is being distributed or sold, the City Health Inspector must be contacted.

**D. STREET CLOSING REQUESTED** (also identify on attached map)

\_\_\_\_\_  
\_\_\_\_\_

**E. ADDITIONAL EQUIPMENT/WORK BEING REQUESTED FROM CITY** (banners hung, extra trash barrels, barricades, etc.) \_\_\_\_\_

- You are responsible for setting up, cleaning up and each of the applicable items on the attached Great River Plaza Operation Plan.
- You are required to have General Liability Insurance in a minimum amount of \$300,000.00 for Personal Injury and \$50,000.00 for Property Damage. The City of Rock Island should be named as an Additional Insured. Please attach copies of required insurance certificate. Insurance is to be submitted to the City Clerk a minimum of one week prior to the date of the event.
- Council approval is required for all activities on the Great River Plaza. Changes can only be made by contacting the City Clerk to obtain Council approval. Please note: requests for changes that require Council approval should be received by the City Clerk at least two weeks prior to Council meeting. Council can only act on items that are on the printed agenda for that meeting. Items that require decisions can no longer be added to the agenda once it is printed and distributed.
- Sound Amplification must be specifically requested.
- Alcohol sales require a state and local license, and alcohol sales must be in a properly demarcated area which prevents entry by minors in accordance with Chapter 3 of the Code of Ordinances of the City of Rock Island. You must also detail security plans establishing your system for checking identification and verifying age.
- Alcoholic beverages cannot be sold/served in glass or cans on the plaza. All alcoholic beverages will be served in plastic cups.
- If you are planning an entertainment venue or activity on the Plaza, you will need to hire an appropriate number of Police Officers as determined by the Police Department. Arrangements must be made at least one month prior to your scheduled event. You may contact the Agent assigned to the Office of Professional Standards at (309) 732-2402.

We, the undersigned (applicant and leader of the Sponsoring Organization for the activity / event(s) described on page one), have read and understand the ordinances and regulations that apply to the Great River Plaza. We agree to pay the required fees and provide the certificate of insurance. We understand that these fees and the Insurance Certificate need to be provided to the City Clerk before the activity / event (s) can occur. We agree to share this information with the other members of the Sponsoring Organization and we will abide by all rules and regulations of the City of Rock Island and the State of Illinois in relation to our activity / event(s).

Applicant \_\_\_\_\_ Date \_\_\_\_\_

Organization Leader \_\_\_\_\_ Date \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE...TO BE COMPLETED BY THE CITY CLERK'S OFFICE**

Application Fee Permit Fee

City Council Approval Date

City Clerk Approval Date

License Number

Application Fee Receipt No Permit Fee Receipt No.

License Printed Date License Delivery Date

**Return Application, Certificate of Insurance and Great River Plaza Operations Plan to:  
City Clerk's Office, 1528 3<sup>rd</sup> Avenue, Rock Island, IL. 61201 (309) 732-2010**