



507 W. Strong St., PO Box 667  
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**APPLICATION FOR SEASONAL SPECIAL EVENT PERMIT**  
**\$500.00 FEE REQUIRED UPON APPROVAL**

Date of Application: \_\_\_\_\_

Name/Business: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Event Information

Address: \_\_\_\_\_

Purpose of the event: \_\_\_\_\_

Length of permit (*dates/months*) From: \_\_\_\_\_ To: \_\_\_\_\_

Day(s) of the week for recurring event: \_\_\_\_\_

Hours: From: \_\_\_\_\_ AM/PM To: \_\_\_\_\_ AM/PM

Average expected number of attendees: \_\_\_\_\_

Will admission be charged: YES NO

Is this a charitable event: YES NO If YES, are you requesting the fee be waived: YES NO

Will alcoholic beverages be served/sold: YES NO

If YES, do you have a current Village of Tolono and State of Illinois Liquor License: YES NO

If NO, are you requesting a temporary Village of Tolono Liquor License: YES NO

Insurance company: \_\_\_\_\_ Amount of liability insurance: \_\_\_\_\_  
(Please attach a copy of Certificate of Liability Insurance)

Number of security persons: \_\_\_\_\_ Will the area be fenced: YES NO

Will there be music or amplified noise: YES NO If YES, what type of amplified noise will be created: \_\_\_\_\_

Village support special requests (road closure, police support, equipment, etc): YES NO

Type of support requested: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Office Use**

Notes:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Reviewed by Village Board:

Date: \_\_\_\_\_

Approved Denied

Date applicant informed of decision: \_\_\_\_\_

Fee Paid

Date: \_\_\_\_\_

Cash Credit Card Check # \_\_\_\_\_