



CITY OF ELMHURST

Community Development Department
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APPLICATION FOR TEMPORARY USE AND EVENT PERMIT

PLEASE PRINT

Property Owner Information:

Property Owner Last Name: _____ First Name: _____
Property Owner Address: _____
City: _____ State: _____ Zip _____
Phone Number: _____ Cell Phone: _____ E-Mail: _____
Signature of Property Owner: _____ Date: _____

Applicant/Organization Information (if different from property owner):

Organization Name: _____ Not for Profit yes no
Address: _____ City: _____ State: _____ Zip _____
Phone Number: _____ Cell Phone: _____ E-Mail: _____
Contact Last Name: _____ Contact First Name: _____
Emergency Contact Person _____ Cell Phone _____
Signature of Applicant: _____ Date: _____

Event/Use Information:

Event Name: _____
Date(s): _____ Hours of Operation: _____
Service of Liquor: yes no If yes, is liquor for sale: yes no Live Music: yes no
Sale or service of food: yes no Number of Attendees: _____ Public or Private: _____

****If the answer is yes to any answer above, please provide additional details in narrative description of event.***

Additional Requirements- Must be submitted with application.

1. Written consent from the property owner granting permission for event (if applicant different from property owner).
2. Site Plan, must include a plan for parking.
3. Narrative description of event.

*****All information must be complete and approved before a permit can be issued*****