



APPLICATION for a SPECIAL EVENT LICENSE

CITY OF ALTON, ILLINOIS

Cameo C. Holland • Alton City Treasurer

101 E Third • Suite 102 • Alton, Illinois 62002

Telephone: (618) 463-3540

E-mail: licensing@cityofaltonil.com

Fax: (618) 463-3520

Website: www.cityofaltonil.com

All indebtedness to the City must be paid in full before any Regulatory License will be issued.

PRINT OR TYPE ONLY

SPECIAL EVENT / BUSINESS NAME: _____

ADDRESS: _____

WEBSITE: _____

TELEPHONE: _____

TYPE OF EVENT: _____

LOCATION OF EVENT: _____

DATES OF EVENT: _____

Illinois Business Tax ID Number: _____

BUSINESS OWNER INFORMATION:

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____ Telephone: _____

E-mail Address: _____ Cell Phone: _____

PROPERTY OWNER INFORMATION:

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____ Telephone: _____

E-mail Address: _____ Cell Phone: _____

LOCAL CONTACT INFORMATION:

Last Name: _____ First Name: _____ Middle Initial: _____

Address: _____ Telephone: _____

E-mail Address: _____ Cell Phone: _____

APPLICANT: Please attach a copy of Driver's License, information to be used by Police Department only

Date of Birth: _____ Place of Birth: _____ Race: _____

(City, State)

Social Security #: _____ - _____ - _____

Applicant's signature: _____

Title: _____ Date: _____



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VENDORS TO BE PRESENT AT SPECIAL EVENT

VENDOR INFORMATION:

FOOD TRUCK

FOOD VENDOR

Business Name: _____ Dates of Attendance: _____

Business Address: _____ Phone: _____

E-mail Address: _____ IL Tax ID #: _____

Owner Last Name: _____ First Name: _____ Middle Initial: _____

Description of Business: _____

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**** ALL VENDORS MUST HAVE AN IL TAX ID# IN ORDER TO PARTICIPATE IN SPECIAL EVENTS ****



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FREQUENTLY ASKED QUESTIONS:

1. **WHAT NEEDS TO BE DONE TO SECURE A SPECIAL EVENT LICENSE?** A special event application needs to be submitted along with the appropriate \$100 fee (per non-alcohol related event) to the Treasurer's Office. If Special Event is alcohol-related, check with the Mayor's Office.
2. **WHAT HAPPENS TO THE APPLICATION?** Once submitted, the application is processed as follows:
 - The Fire Dept. will approve to ensure that all Illinois State Fire Code requirements are met.
 - The Alton Police Department conducts a background check of the owner and manager.
 - The City Council must approve as well before license will be issued.
3. **HOW LONG DOES THE PROCESS TAKE?** Allow the approval process up to 14-21 days.
4. **MUST A LICENSE BE SECURED PRIOR TO CONDUCTING BUSINESS?** Yes.
5. **WHAT IS THE PENALTY FOR CONDUCTING BUSINESS WITHOUT A LICENSE?** The business will be shut down until all license requirements are met and/or an ordinance violation will be filed with the Circuit Clerk.
6. **DO I RENEW THIS LICENSE FOR EVERY EVENT?** Yes, the special event licenses are good for up to seven (7) consecutive days only. If the event last more than seven (7) consecutive days, there will need to be multiple applications completed, with approvals and fees for each application. It is your responsibility as a business owner to renew this license.
7. **MUST I REGISTER WITH THE DEPT OF REV IF I SELL ITEMS ONLY AT THESE SPECIAL EVENTS?** Yes, All Illinois business taxpayers, whether Illinois residents or not, must register with the Dept of Rev for each tax type they will collect and for any tax type they are required to pay. Failing to register is a criminal offense. You may register by contacting: (217) 785-3707.
8. **WHAT REQUIREMENTS ARE PLACED ON PERSONS WHO PROVIDE RETAIL SPACE AT THESE EVENTS?** Any person who promotes, organizes, or provides retail selling space for concessionaires or other types of sellers at fairs, art shows, craft shows, flea markets or other similar events is required to file a report with Dept of Rev. The following information must be reported to the Dept of Rev for each vendor:
 - name of the vendor's business
 - name of the person or persons engaged in the vendor's business
 - permanent address of the business
 - Illinois account id number of the business
 - dates and location of the event

The report is due no later than the 20th day of the month following the month during which the event was held. Any person who fails to file a report is subject to a fine not to exceed \$250. Reports should be sent to:



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- Send the report to the:
SPECIAL EVENTS UNIT
ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19035
SPRINGFIELD IL 62794-9035

9. **IF I AM NOT CONTACTED AT AN EVENT, WHAT IS MY RESPONSIBILITY AND WHERE DO I GET HELP?** It's your responsibility to collect tax (at the proper rate), pay the tax collected, and report the tax. To obtain the correct tax rate or for forms and information on how to file, please contact the Special Event Coordinator at:

- <http://tax.illinois.gov>
- Email: Rev.SpecialEvents@illinois.gov
- Call: 1-847-294-4475
- Write to:
SPECIAL EVENTS UNIT
ILLINOIS DEPARTMENT OF REVENUE
PO BOX 19035
SPRINGFIELD, IL 62794-9035

...or visit:

- <http://tax.illinois.gov/Individuals/SalesandRelated/Fairs.htm>

10. **MAJOR CREDIT CARDS ARE ACCEPTED IN THE TREASURER'S OFFICE OR YOU MAY PAY ONLINE AT:**
www.cityofaltonil.com.

- Select the 'MyAccessCenter' link on the left side of the page
- Select **ONLINE SERVICES | Online Payments | Business Licensing Payments**
- Fill in all Contact Information and then click Continue
 - Please note any changes or enter/edit your missing information as frequently as you have any changes so we can keep your file up-to-date.

11. **APPLY FOR AN ILLINOIS BUSINESS TAX I.D. #.** It will take 6 to 8 weeks to get the number if handled through the mail. If you go to Springfield or Fairview Heights, the number will be issued at that time. Application may be made through the following:

- **Springfield: (217) 782-3336**
- **Fairview Heights: 1 (800) 732-8866**
- <https://mytax.illinois.gov>



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AFFIDAVIT

I _____, d/b/a _____,
have completed and submitted an application for a Special Event License in the City of Alton, Illinois; I
acknowledge that this does not indicate that I have been licensed to hold a Special Event or to operate business.
A Special Event License will not be issued until all inspections have been completed and approved.

Signature: _____
Applicant *Date*

For office use only:

Signature

Date

BUSINESS EMERGENCY CONTACT INFORMATION

(This information is kept confidential and is for Alton Police Dept. use only)

BUSINESS NAME: _____

BUSINESS ADDRESS: _____

BUSINESS OWNER: _____

BUSINESS PHONE: _____

BUSINESS HOURS: _____

* **EMERGENCY CONTACT PERSON: Should have a minimum of two names. Only key holders should be listed.** Please list for each: Name, Date of Birth, Home Address, Home Phone, Business Phone (if different from listed business), pager/other number, and/or Cellular phone number.

1. Name: _____ DOB: _____
First, Middle, Last *MM/DD/YY*

Position: _____
Constituent-Owner/Manager/Employee

Home Address: _____
Street *City, State* *ZIP*

Home Phone: _____ Business Phone: _____

Pager/Other: _____ Cellular: _____

2. Name: _____ DOB: _____
First, Middle, Last *MM/DD/YY*

Position: _____
Constituent-Owner/Manager/Employee

Home Address: _____
Street *City, State* *ZIP*

Home Phone: _____ Business Phone: _____

Pager/Other: _____ Cellular: _____