

City of Streator
204 S. Bloomington Street
Streator, Illinois 61364
815/672-2517 Fax 815/672-7566



APPLICATION FOR A PERMIT – USE OF CITY PARKS

Reference: Streator Municipal Code Chapter 12.32

Applicant's Name: _____ Phone: _____

Home Address, City, State, & Zip: _____

Group or Organization Name: _____ Number of Persons Attending: _____

Type of Event: _____

Which facility is application for? * **Groups of 25 or more persons must provide proof of insurance.**

* **Park Hours are from Sunrise to Sunset.**

Anderson Field Central Park Oakland Park Marilla Park

Heritage Park Spring Lake

City Park – **NO PARKING ALLOWED IN PARK.** Unloading is allowed in parking area.

Plumb Pavilion – All events require liability insurance.

Date Requested: _____

Start Time: _____

End Time: _____

Yes Will alcohol be used in park? (Beer & Wine Only)
(**Only allowed by special permit at Anderson, Marilla, Oakland and City Park**)

No Who will supply the alcohol? _____

Has Dram Shop Insurance been provided?

Yes

No

Has copy of policy been provided?

Yes

No

Yes Will there be live or recorded music? (**Music must end by 10:00 PM**)

No

Copy of Photo ID of Signator Required.

Signature of Responsible Person: _____

Date: _____

(over)

LIQUOR COMMISSIONER ACTION (Only if alcoholic beverages will be present.)

- Application Approved
- Application disapproved & reasons are attached.

Liquor Commissioner Signature _____ Date: _____

CITY CLERK OR DESIGNEE ACTION

- Approved & Issued by this Document.
- Permit Not Issued & Applicant Informed.

City Clerk or Designee Signature _____ Date: _____

TOURISM CHAIRMAN ACTION (Plumb Pavilion Only)

- Insurance Certificate attached.
- Application Approved
- Application disapproved & reasons are attached.

Tourism Chairman Signature _____ Date: _____

Note: Picnic Shelters are not reserved by the City.