



VILLAGE OF ARLINGTON HEIGHTS  
 Department of Building & Life Safety  
 3 S. Arlington Heights Rd.  
 Arlington Heights, IL 60005  
 Phone (847) 368-5560  
 Fax (847) 368-5975  
 Website: Building@vah.com

20 **EXHIBITOR LICENSE APPLICATION**

**SECTION #10-804**

**APPLICATION MUST BE MADE 15 DAYS PRIOR TO OPENING DATE.**

**NAME OF COMPANY:** \_\_\_\_\_ **PHONE #:** \_\_\_\_\_  
**COMPANY ADDRESS:** \_\_\_\_\_  
**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_  
**FEIN #:** \_\_\_\_\_ **ST. IBT #:** \_\_\_\_\_

**DATE(S) OF EXHIBIT:** \_\_\_\_\_  
**NATURE OF SHOW OR ITEM(S) ON EXHIBIT:** \_\_\_\_\_  
**LOCATION OF EXHIBITION:** \_\_\_\_\_  
**NAME OF PERSON ON SITE:** \_\_\_\_\_ **CELL PHONE #:** \_\_\_\_\_  
**ESTIMATED ATTENDANCE:** \_\_\_\_\_ **TICKET CHARGE: \$** \_\_\_\_\_  
**FIRE GUARD REQUIRED FOR ATTENDANCE OF 1500 OR MORE. ADDITIONAL FEES MAY BE REQUIRED. CONTACT THE ARLINGTON HEIGHTS FIRE DEPARTMENT AT (847) 368-5450.**

**A SITE PLAN/FLOOR PLAN SHOWING THE SETUP OF EVENT IS REQUIRED WITH APPLICATION.**  
**IF INSTALLING A TENT AND/OR GENERATOR SEPERATE PERMITS AND FEES ARE REQUIRED.**  
**IF A TENT IS TO BE INSTALLED PLEASE PROVIDE:**  
 1. BUILDING PERMIT APPLICATION.  
 2. SITE PLAN/FLOOR PLAN SHOWING LOCATION OF TENT.  
 3. CERTIFICATE OF FLAME RESISTANCE.  
**IF A GENERATOR IS TO BE INSTALLED PLEASE PROVIDE.**  
 1. BUILDING PERMIT APPLICATION.  
 2. ELECTRICAL PERMIT APPLICATION.  
 3. COPY OF ELECTRICIAN'S REGISTRATION.  
 4. SITE PLAN/FLOOR PLAN SHOWING LOCATION OF GENERATOR.

**DAILY LICENSE FEES - MUST BE PAID 5 DAYS PRIOR TO OPENING DATE.**  
**PRIVATE PROPERTY.....\$115.00 PER DAY**    **PUBLIC PROPERTY.....\$12.00 PER DAY**  
**NON-PROFIT ORGANIZATION.....\$6.00 PER DAY**    **MAXIMUM FEE.....\$860.00**

**PLEASE PROVIDE THE NAME OF THE INDIVIDUAL OR INDIVIDUALS WHO SHALL BE THE RESPONSIBLE PARTIES FOR THE ACTIVITIES UNDERTAKEN WITHIN THE VILLAGE OF ARLINGTON HEIGHTS.**  
**NAME:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_ **HOME PHONE:** \_\_\_\_\_  
**HOME ADDRESS:** \_\_\_\_\_ **CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_  
**DATE OF BIRTH:** \_\_\_\_\_ **DRIVERS LICENSE #:** \_\_\_\_\_ **STATE WHERE ISSUED:** \_\_\_\_\_

**I UNDERSTAND THE ISSUANCE OF THIS LICENSE IS CONDITIONAL UPON COMPLIANCE WITH ALL VILLAGE ORDINANCES AND THE RESULTS OF ANY INSPECTION OF THE ABOVE PREMISES AT THIS TIME OR ANY SUBSEQUENT INSEPCION WHILE THIS LICENSE IS IN FORCE. FALSIFICATION OR OMISSION OF ANY INFORMATION ON THIS APPLICATION MAY BE GROUNDS FOR DENIAL OR REVOCATION.**

**HAVE YOU BEEN CONVICTED OF A CRIME EXCEPT MINOR TRAFFIC VIOLATIONS?**  YES  NO **IF YES PLEASE PROVIDE BELOW THE DATE, CITY AND STATE WHERE THE ARREST(S) TOOK PLACE, THE SPECIFIC CHARGES THAT WERE FILED AND THE DATE OF THE COURT DISPOSITION AND SENTENCE IMPOSED IF APPROPRIATE.** \_\_\_\_\_

**SIGNATURE OF APPLICANT:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**FOR OFFICE USE ONLY**  
**LICENSING DEPARTMENT:**  APPROVED  DENIED **CONTROL #:** \_\_\_\_\_  
**COPY SENT TO:**  FIRE SAFETY  FIRE DEPARTMENT  POLICE