



PEORIA POLICE DEPARTMENT



September 15, 2016

The Honorable James E. Ardis III  
Local Liquor Commissioner  
City of Peoria, Illinois

RE: Temporary Liquor License Application  
Peoria Promise Foundation  
1100 - 1200 blocks of SW Adams St.  
Class H (outdoor event)

Dear Mr. Ardis,

Enclosed is an application from the Peoria Promise Foundation for a Class H temporary liquor license to be used during a fundraising event on Saturday, October 22, 2016, from 4:00 p.m. until 8:00 p.m. Peoria Promise is hosting "*CityFest>>Warehouse*" in the 1100 - 1200 blocks of SW Adams St., Peoria, Illinois. The event will consist of music, food and activities for the participants. Security for this event will be provided by Vital Security Services and the area for alcohol consumption will be fenced on both ends of Adams Street at Pecan and Persimmon, as well as on Adams at Spencer. Proceeds from the event will benefit the Peoria Promise Foundation, a registered charity in the State of Illinois.

Officer Kevin Slavens conducted a background investigation on the officers listed on the application. Ms. Marylean H. Abney, 5028 Weaver Ridge Blvd., Peoria, Illinois, is the president and Ms. Janaki H. Nair, 1539 W. Moss Ave., Peoria, Illinois, is the secretary of Peoria Promise. Mr. Scott D. Reeise is the event chairmen. Nothing was found that would prevent the Peoria Promise Foundation from receiving the requested temporary liquor license.

The Peoria Police Department has no objections to this license request.

Sincerely,

  
Jerry E. Mitchell  
Chief of Police

JEM/ks

cc: Deputy Liquor Commissioner  
City Clerk  
Corporation Counsel

600 S. W. Adams Street  
Peoria, IL 61602-1592  
Phone 309.494.8300



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
09/16/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).


<b>PRODUCER</b> Hediger and Meyers, Inc. 4208 W. Partridge Way P.O. Box 3858 Peoria, IL 61612 William C. Voorhees	<b>CONTACT NAME:</b> William C. Voorhees <b>PHONE (A/C, No, Ext):</b> 309-691-5001 <b>FAX (A/C, No):</b> 309-691-9402 <b>E-MAIL ADDRESS:</b>
	<b>INSURER(S) AFFORDING COVERAGE</b> INSURER A : U.S. Insurance Company INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :
<b>INSURED</b> Peoria Promise Foundation P. O. Box 10226 Peoria, IL 61612	<b>NAIC #</b>

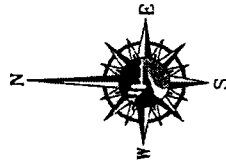
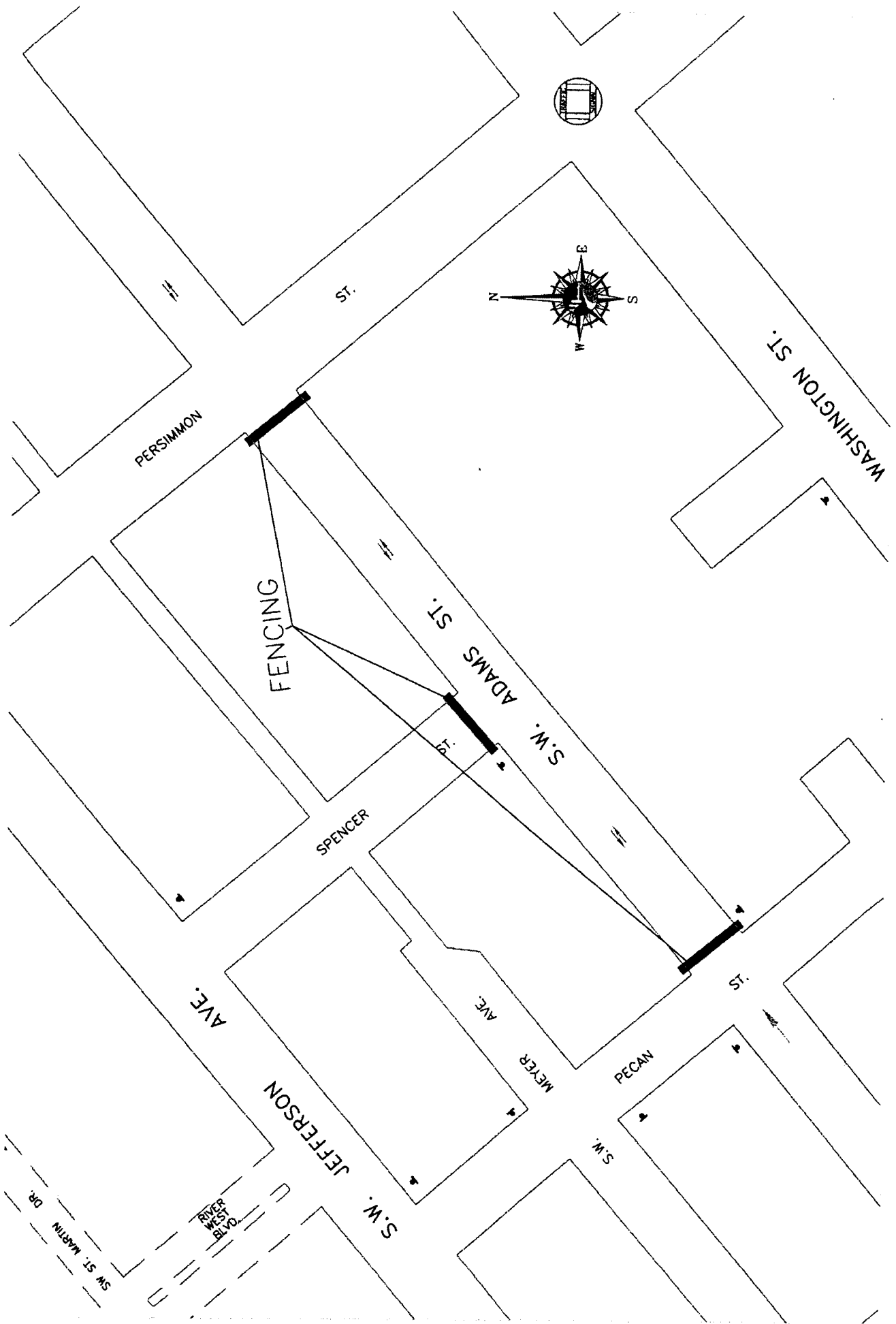
**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	X	16IL0000262SE00	10/22/2016	10/22/2016	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ \$ AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$ WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> N/A If yes, describe under DESCRIPTION OF OPERATIONS below
A	Liquor Liability	X	16IL0000262SE00	10/22/2016	10/22/2016	PER STATUTE    OTH-ER E.L EACH ACCIDENT \$ E.L DISEASE - EA EMPLOYEE \$ E.L DISEASE - POLICY LIMIT \$ IL Liquor 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)  
For City Fest>>Warehouse to be held 10/22/16 4PM to 8PM on Adams Street, Peoria IL

<b>CERTIFICATE HOLDER</b>  CITYPE2  City of Peoria Office of the City Clerk Liquor Liability 419 Fulton Street, Suite 401 Peoria, IL 61602	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	<b>AUTHORIZED REPRESENTATIVE</b>  



PERSIMMON ST.

WASHINGTON ST.

FENCING

ADAMS ST.

SPENCER AVE.

JEFFERSON AVE.

S.W. JEFFERSON AVE.

MEYER AVE.

PECAN ST.

S.W. MARTIN DR.

RIVER WEST BLVD.

S.W. JEFFERSON AVE.