

City of Tulsa SPECIAL EVENT PERMIT APPLICATION

Summary of Event

Name of Event: Edison Homecoming Parade	Date(s) of Event: September 13, 2019			
Location Address: 2906 E 41ST ST S Council District(s): 9				
Event Description: High School Homecoming Parade along 41st Street between Delaware Ave and Florence Ave				
Event Category: Parade				
Event Includes: Public Right of Way, Street Closure				
Anticipated Attendance: Total: <u>1400</u>	Per Day: <u>1400</u>			
Anticipated Participants: Total: <u>300</u>	Per Day: <u>300</u>			
Number of Events for Monthly Event: NA				

Host Organization, Applicant and Professional Event Organizer Information

Host Organization:	Tulsa Public Schools- Edison HS	Website	: NA			
Chief Officer of Host Organization: Susan Griffin						
Email and Phone:	griffsu@tulsaschools.org 918-746-8500					
Applicant Name:	Susan Griffin					
Email and Phone:	griffsu@tulsaschools.org 918-746-8500					
Professional Event Organizer:	NA					
Email and Phone:						
On-site Contact:	<u>Susan Griffin</u>	Mobile:	<u>918-746-8500</u>			
Billing Contact:	Tulsa Public Schools- Edison HS	Phone:	<u>918-746-8500</u>			
Billing Address:	<u>c/o Susan Griffin 2906 E. 41st,</u> <u>Tulsa OK 74105</u>					

Event Timeline and Lane/Street Closure Information

Event Setup:	Date: 09/13/2019 T	īme: <u>12:45PM</u>			
Street Closure for Event Setup:	Date: 09/13/2019 T	īme: <u>12:15PM</u>			
Street(s) to be Closed for Event Setup:	Staging Delaware Avenue between 41st Street and 39th Street				
Event Start:	Date: 09/13/2019 T	ime: <u>1:00PM</u>			
Street Closure for Event Start:	Date: 09/13/2019 T	ime: <u>12:45PM</u>			
Street(s) to be Closed for Event Start:	Route 41st Street from Delaware Avenue to FLorence Avenue Disbanding Florence Avenue between 41st Street and 42nd Street				
Run, Walk, Parade Start Time:	<u>1:15PM</u>				
Daily Event Hours: <u>NA</u>					
Event End:	Date: 09/13/2019 T	īme: <u>1:45PM</u>			
Street Reopens after Event End:	Date: 09/13/2019 T	īme: <u>2:00PM</u>			
Event Teardown:	Date: 09/13/2019 T	īme: <u>1:45pm</u>			
Street Reopens after Event Teardown:	Date: 09/13/2019 T	īme: <u>2:00pm</u>			

Secondary Permits Required

Beer Sales, Alcohol Sales:	<u>Not</u>	t Applicable			
Number of Food Vendors:	0				
Number of Food Trucks:	0				
Food Cooked on-site: No		Fuel(s) to be used:			
Number of Item Vendors:	0	Number of Service Vendors:	0		
Number of Tents/Canopies:	0	Provider and Phone: <u>NA</u>			
Number of Inflatables:	0	Provider and Phone: <u>NA</u> ,			
Number of Amusement Rides	: <u>0</u>	Provider and Phone: <u>NA</u>			
Use of fireworks, rockets, lasers, or other pyrotechnics: <u>No</u>					

Provider and Phone: <u>NA</u>,

Security, Medical, Traffic Control, Crowd Management and Parking Plans

Security and/or Police: Contact, Email and Phone: <u>TPS Campus Police (918) 749-9966</u> Medical and/or First Aid Services: Contact, Email and Phone: <u>Edison School Nurse (918) 764-8500</u> Traffic Control Barricade Company: Contact, Email and Phone: <u>NA</u> Equipment Setup: Date: <u>09/13/2019</u> Time: <u>NA</u> Equipment Pickup: Date: <u>09/13/2019</u> Time: <u>NA</u> Crowd Management Fencing Company: Contact, Email and Phone: <u>NA</u> Equipment Setup: Date: Time: Equipment Pickup: Date: Time: Parking Type: <u>ADA parking available, Paved Lot</u> Transportation Service: <u>No service</u> Transportation Service: Contact, Email and Phone: <u>NA</u>

Sponsor and Other Event Information

Event Sponsor(s): E	dison Student	Counc	il	
Name of Park and Lo	ocation, if appl	licable:	<u>NA</u>	
Drone: <u>No</u>				
Portable Toilets:	Provider and P	hone:	<u>NA</u>	
Total Number of Por	table Toilets:	0		Number of ADA Accessible Portable Toilets: 0
Equipment Setup: Da	ate:		Time:	
Equipment Pickup: D	Date:		Time:	
Other information:	Request 2 Th	D mot	orcvcle offi	cers to lead the parade

Entertainment and Related Activities

Number of Stages: 0	Number of Performers/Bands: 50					
Performer/Band name and music type:	High School Marching	Band				
Sound Amplification: No	Start Time:		Finish Time:			
Please describe the sound equipment th	nat will be used for your	event:				
NA						
Sound checks conducted prior to the even	Start Time:	Finish Time:				
Describe hot air balloons, fire lanterns o	r similar devices used a	t event:				
NA						
Describe the use of any signs, banners,	decorations, or special	lighting used at e	event:			
Signs, Banners, and 4 Floats						
Mitigation of Impact						
Please describe your plan for cleanup an event: Remove the floats from Florence	<u>,</u>	•	nd garbage during and after your			
Number of Trash Receptacles: 6	Number of Dumpsters	: <u>4</u> Numbe	er of Recycling Containers: <u>6</u>			
Cleanup Service Provider and Phone, if	applicable: <u>NA</u>					

 Equipment Setup: Date:
 Time:
 Equipment Pickup: Date:
 Time:

 Presented Event Concept to:
 Time:
 Time:
 Time:

Residents, Schools

Avidavit of Applicant

I certify that the information contained in this Application is true and correct to the best of my knowledge and belief. That I have read, understand, and agree to abide by the rules and regulations governing this Event. I agree to comply with all requirements of the City, County and State, and any other regulatory entity related to this Event. I agree to pay and be financially responsible for any costs and fees that may be incurred by the City of Tulsa due to the Event. I further agree to indemnify and hold harmless the City of Tulsa, and all City of Tulsa officers, employees, agents, representatives, from any claims (including cost of defending such claims) or damages that may arise from activities related to the Event. I understand that a Permit does not excuse my failure to comply with orders of law enforcement personnel, firefighters, City Event personnel, or emergency workers, and does not provide immunity from civil claims of third parties that are based upon injuries sustained at, or in conjunction with this Event.

Initials: On File

For City of Tulsa Special Events Committee Use Only

Date received:	09/12/2019	Date routed:	09/12/2	2019	Date for review:	Email/Website	
Special Events (Committee Recom	mendation:			□ Yes □ No		
Date routed to M	layor:		Mayor'	s Recomme	ndation:		□ Yes □ No
Date routed to C	Council:		Ci	ty Council A	pproval:		□ Yes □ No
Date Permit Issu	ied:	Com	iments:	Form and r	map revised & outs	tanding fees 09/	12/2019.

