

## City of Tulsa Special Event Permit Application

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Summary of Even	ıt			
Event Title: Carnival		Date of Event: March 29, 2017-April 2, 2017		
Event Location: 4200 S. W. Blvd. (Crystal City)		Council Dist	rict: 2	
Event Description: C	Carnival	(Submit Flyer or	Brochure in	Electronic Format)
Event Sponsors: Cha	andler Park Partners		****	
Anticipated Attendar	nce (participants, staff, vendo	ors, crowd, etc.): Total: 25,000	) Per	Day: 2,500
Event Organizer	Information			
Organizing Agency:	Village 66	Web Address: www	w.parks.tuls	acounty.org
Agency Contact: Pat Ward		Email Address: pward@tulsacounty.org		
On-Site Contact: Tom or Sam Cue		On-Site Phone: 918-808-0198		
Billing Contact: Pat Ward		Billing Phone: 918-596-5977		
	15 Charles Page Blvd.	Tulsa	OK	74127
Agency Status: Prof	it Non-Profit Fund	City draiser? / What cause: Chandle	State er Park Partn	Zip ers
Site Plan and Ro	ute Map			
Event Set-up:	Date: March 27, 2017	Day of Week: Monday	T	ime: 8am
Street Closing for Set-up, Stages, Tents, etc.:		Date: n/a	T	ime: <u>n/a</u>
Street(s) to be Close	d: n/a using parking lot			
		(Submit a Site N	Map in CAD	/Electronic Format)
<b>Event Opens:</b>	Date: March 29, 2017	Day of Week: Wednesday	T	ime: 4pm
Street Closing for R	ace, Parade, Festival, etc.:	Date: n/a	Т	ime: <u>n/a</u>
Street(s) to be Close	d: n/a			
		(Submit Route I	Map in CAD	/Electronic Format)
Race, Parade, or Esc	ort Start Times: n/a			,
Daily Festival or Str	eet Party Times: 4pm Wed.,4	pm Thurs., 4pm Fri., and 11ai	n Sat.	
Road Race Service C	,			
<b>Event Closes:</b>	Date: April 1, 2017	Day of Week: Saturday	T	ime: 11pm
Street Opening:	Date: n/a parking lot	Day of Week: _n/a	T	ime: n/a
<b>Event Dismantle:</b>	Date: April 1, 2017	Day of Week: Saturday	T	ime: 12am
Street Opening:	Date: n/a	Day of Week: n/a	T	ime: n/a

Secondary Permit Kequirements						
Yes ✓ No Is this an Open Air Event?	☐Public Property					
Yes No ✓ Alcohol or Beer On-Site?	Alcohol Sales Beer Sales Free Beverages					
Yes ✓ No ☐ Concessionaires On-Site?	Number of Food Vendors: 4 Number of Item Vendors: 0					
Yes ✓ No ☐ Food Preparation On-Site?	Charcoal Electric Gas					
Yes No ✓ Tents or Stages On-Site?	If yes, what sizes:					
Yes No ✓ Other Structures On-Site?	If yes, please explain:					
Yes No ✓ Using a City or River Park?	Name and location:					
Security, Medical, Traffic, and Parki	ng Plans					
Yes ✓ No Security or Police On-Site?	Agency and Phone: Roy Heim 918-271-4883					
If yes, please describe or provide an attachment of your plan: Security will walk around and defuse any						
problems that may occur.						
Yes ✓ No  Medical First Aid On-Site?	Agency and Phone: n/a					
If yes, please describe or provide an attachment of your plan: We will have volunteers with a first aid kit.						
Yes No ✓ Using Barricade Company?	Agency and Phone:					
If yes, the Barricade Co. providing equipmen	nt for the street closure must submit the plan in CAD/Electronic Format.					
Equipment Setup: Date: Time	e: Equipment Pickup: Date: Time:					
Yes ✓ No Is there Parking Available?	If yes, please describe or provide an attachment of your plan:					
Yes ✓ No Is there Disabled Parking?	If yes, please describe or provide an attachment of your plan:					
Yes No ✓ Using a Shuttle Service?	If yes, please describe or provide an attachment of your plan:					
Other Related Activities and Informat						
Yes ✓ No Entertainment On-Site?	☐ Live Music ☐ Recorded Music ☐ Dancing					
Fireworks Inflatables	Animals					
Yes No ✓ Sound Amplification?	Setup Time: Start Time: Finish Time:					
Yes ✓ No Certificate of Insurance? Agency and Phone: TBD						
If yes, submit certificate. If no, please explain: Pending						
Yes ✓ No Portable Rest Rooms? Agency and Phone: Porta Johns of Tulsa 918-836-8657						
Number of Portable Rest Rooms: 4 Number of Disability Accessible Portable Rest Rooms: 1						
Equipment Setup: Date: March 27, Time: 8am Equipment Pickup: Date: April 3, 2017 Time: 8am						

Mitigation of Impact		
Please describe your plan for cleanup Volunteers will clean the area.		aring and after your event:
Number of Trash Receptacles: <u>20-30</u> Yes ✓ No Using a Sanitation Ser		umber of Recycling Containers: 0
		o: Date: April 3, 2017 Time: 8am
Yes No ✓ Have you presented yo	our event concept to the affected reside	ents, businesses, churches, and schools?
		ribute two weeks prior to your event?
Yes No Other Information?		
Tes Not Other Information:		
Affidavit of Applicant		
Tulsa Police officers and public safety service control, and security. The Organizing Agenci including, but not limited to, Curfew Ordinana application approval does not imply City spo I certify that the information contained in the read, understand, and agree to abide by the rul of the Organizing Agency, am also authorize fees that may be incurred by or on behalf of the organizer of the organi	es, and traffic-control signage and barricades by has the responsibility to be aware of and ce, City/County Public Health Regulations, a pasorship. Review the instructions for furthe foregoing application is true and correct to les and regulations governing the proposed S d to commit that agency, and therefore agree the Event to the City of Tulsa and Rolice Department.	will be required for street closings, traffic/crowd comply with City Ordinances and Regulations and Police/Park Public Safety Requirements. An information in reference to Special Events. The best of my knowledge and belief that I have pecial Event. I further certify that I, on the behalf to be financially responsible for any costs and partment. Any omissions will delay the process.  Date:
Print Name: MICHAEL R. MASS	SEY Signature: Whichael	17. 1 Jabbery Date: 1-10-17
Mail to: Special Event Coordinat	ing Committee, 1/3 East 2nd Street	, Suite 590, Tulsa, Oklahoma 74103 I serve as your electronic signature.
For City of Tulsa	Special Event Coordinating C	Committee Use Only
Date received: 02.10.2017	Date routed: 02.20.2017	_ Date for review:03.08.2017
this date: 02.28.2017 If any prostating the solution or reason for the objection	blems are resolved or not resolved by that t should be submitted to: Special Event Coord	er and discuss the problems and solutions before ime, a copy of this application and brief memo inating Committee, 175 East 2nd Street, Ste 590 scial Events at 918.576.5636. Fax 918.699.3602
Special Event Coordinating Committ	ee Recommendation: Pending	] Yes
		Yes No :
Date routed to Council:	City Council Approval:	Yes No :
Comments:		