

City of Tulsa SPECIAL EVENT PERMIT APPLICATION

Page 1 of 8

| Summary of Event_ | | | | | |
|--|------------------------------|---------------------|-------------------------------|-------------------|--|
| Name of Event: Run to the SON | | | Date(s) of Event: Se | ept. 4, 2017 | |
| Location Start: Parkview Baptist Church 5805 S Sheridan Rd | | | Council District: 7 | | |
| Location End: Parkview B | aptist Church 5805 S She | ridan Rd | Council District: 7 | | |
| Event Description: 5 km R | un and 1 Mile Fun Run | | (Attao | ch Flyer/Brochure | |
| Event Category: | ✓ Athletic/Recreation | Parade | Process | ion/March | |
| Festival/Celebration | Carnival | Circus | Farmer, | Outdoor Market | |
| Concert/Performance | Street/Block Party | Police Esco | ort Miscella | neous | |
| Event Includes: | ✓ Street Closure | Lane Closu | re Sidewal | k Closure | |
| Public Rights of Way | Private Property | Public Park | rivate | Park | |
| ☐ Tent/Canopy | Merchandise Sales | Food Sales | Beer/Al | cohol Sales | |
| Amplified Sound | Live Entertainment | Open Flam | e Firewor | ks/Pyrotechnics | |
| No Parking Signage | Generator/Electricity | Other: | | | |
| Anticipated Participants: To | otal: 250 | Per Day | _{/:} 250 | | |
| Anticipated Attendance: Total: 500 | | Per Day: <u>500</u> | | | |
| Yes No 🗸 Is this a Mon | thly Event? If yes, how many | events during the | emonth? | | |
| Host Organization, A | Applicant and Profession | onal Event Or | rganizer Inform | ation | |
| | | | _{e:} parkviewbaptist | | |
| Chief Officer of Host Organiz | | | | | |
| Email: mloftis@parkviewbaptist.org | | Phone: | 918-344-0089 | | |
| Applicant Name: Melinda L | _oftis | | | | |
| Email: mloftis@parkviewbaptist.org | | Phone: | 918-344-0089 | | |
| Professional Event Organize | r: None | | | | |
| Email: | | Phone: | | | |
| On-site Contact: Melinda Loftis | | Mobile: | 918-344-0089 | | |
| Billing Contact: Melinda Loftis | | | 918-344-0089 | | |
| Billing Address: 5805 S. Sh | Tulsa | OK | 74145 | | |
| | Street | City | State | Zip | |

Event Timeline and Lane/Street Closure Information

| Event Setup: | Date: | September 4, 2017 | Time: | 7am |
|--|---------|---------------------------|-------------|--------------------------|
| Street Closure for Event Setup: | | September 4, 2017 | Time: | 7:30am |
| Street(s) to be Closed for Event Setup: See a | attache | ed course map | | |
| | | | | (Attach Site Map) |
| Event Start: | Date: | September 4, 2017 | Time: | 8am |
| Street Closure for Event Start: | Date: | September 4, 2017 | | 7:30am |
| Street(s) to be Closed for Event Start: See at | ttache | d course map | | |
| | | | | (Attach Route Map) |
| Run, Walk, Parade Start Time: 8am | | | | |
| Daily Event Hours: 8 - 9 am | | | | |
| Event End: | Date: | September 4, 2017 | Time: | 9am |
| Street Reopens After Event End: | Date: | September 4, 2017 | Time: | 9am |
| Event Teardown: | Date: | September 4, 2017 | Time: | 9am |
| Street Reopens After Event Teardown: | Date: | September 4, 2017 | | 9:15am |
| Secondary Permits Required | | | | |
| Yes No V Low-Point Beer on-site? | Ве | eer Sales | eer | |
| Yes No V High-Point/Alcohol on-site? | ☐ Al | cohol Sales Wine S | ales | Free Alcohol/Wine |
| Yes No 🗸 Food Vendor on-site? | Numb | per of Food Vendors: | | |
| Yes No 🗹 Food Truck on-site? | Numb | per of Food Trucks: | | |
| Yes No 🗸 Food Cooked on-site? | Cl | narcoal Electric | Gas | Other |
| Yes No 🗸 Other Vendor on-site? | Numb | per of Item Vendors:N | lumber of : | Service Vendors: |
| Yes No V Tent/Canopy on-site? If yes, | Provid | er and Phone: | | |
| Please list number and size: | | | | (Attach Tent Permit) |
| Yes No 🗹 Inflatable on-site? If yes, Pro | ovider, | Phone and Number of Infla | atables: | |
| Yes No Amusement Ride on-site? If | yes, Pı | rovider, Phone and Numbe | r of Rides: | |
| Big Rock Entertainment, JR 918-299-54 | 164, 3 | rides | _(Attach C | ertificate of Operation) |
| Yes No Does your event include the | | | | |
| Provider and Phone: | | | | ttach Fireworks Permit) |

| Security, Medical, Traffic | <u>c Control, Cro</u> | wd Management | <u>and Parking</u> | Plans |
|--|----------------------------|-----------------------------|--------------------|-------------------------|
| Yes No Using Security and | d/or Police? If yes, i | its Contact, Email and P | hone: TPD Spe | ecial Events Unit |
| 918-586-6054 | | | | (Attach Security Plan) |
| Yes No V Using Medical and | d/or First Aid Servic | ces? If yes, its Contact, E | Email and Phone: | |
| | | | | (Attach Medical Plan) |
| Yes No V Using Traffic Cont | rol Barricade Com | pany? If yes, its Contac | t, Email and Phor | ne: |
| | | | (Atta | ch Traffic Control Plan |
| Equipment Setup: Date: | Time: | Equipment Picku | p: Date: | Time: |
| Yes No V Using Crowd Man | agement Fencing (| Company? If yes, its Co | ontact, Email and | Phone: |
| | | | | (Attach Fencing Plan) |
| Equipment Setup: Date: | Time: | Equipment Picku | p: Date: | Time: |
| Yes 🗹 No 🗌 Is Parking Availab | le? Parking G | arage 🔽 Paved Lot | Street | Unpaved Lot |
| If yes, please attach Parking Plan | /Map. If no, pleas | e explain: | | |
| Yes No Is ADA Parking Av lots used have painted design | | | If no, please ex | plain: The parking |
| Yes No V Using Shuttle Serv | vice? If yes, its Con | tact, Email and Phone: | | |
| | | | | _ (Attach Shuttle Plan) |
| Yes No V Using Valet Service | e? If yes, its Conta | act, Email and Phone: | | |
| | | | | (Attach Valet Plan) |
| Sponsor and Other Ever | <u>nt Information</u> | 1 | | |
| Event Sponsor(s): Parkview Bar | otist Church | | | |
| | | | | |
| Yes No V Using City, Count | y, <u>River</u> or Private | Park? If yes, Name of I | Park and Locatio | n: |
| | | | | _ (Attach Park Permit) |
| Yes No V Using Drone on-s | ite? Co | mmercial Operator | Recreation | al Operator |
| If yes, please attach License. If r | ione, please explai | in: | | |
| Yes No V Using Portable To | oilets? If yes, Provi | ider and Phone: | | |
| Total Number of Portable Toilets: | :N | lumber of ADA Accessib | le Portable Toile | ts: |
| Equipment Setup: Date: | Time: | Equipment Pickup | : Date: | Time: |
| Yes No V Other information | 1? | | | |
| | | | | |

Site Plan and Route Map_

| Your e | event site plan and route map should be submitted in CAD format and include, but not limited to: |
|------------------|--|
| х | An outline of the entire event venue including the names of all streets or areas that are part of the venue and surrounding area. If the event involves a moving route of any kind, indicate the direction of travel and all street and lane closures. |
| | The location of fencing, barriers and/or barricades. Indicate any removable fencing for emergency access. |
| | The provision of minimum twenty foot (20') emergency access lanes throughout the event venue. |
| X | The location of first aid facilities and ambulance stand-by. |
| х | The location of all stages, platforms, scaffolding, bleachers, grandstands, canopies, tents, portable toilets, booths, beer gardens, cooking areas, trash containers and dumpsters, and other temporary structures. |
| X | A detail or close-up of the food booth/truck and cooking area configuration including booth/truck identification of all vendors cooking with flammable gases or barbecue grills. |
| X | Generator locations and/or source of electricity. |
| | Placement of support and media vehicles and/or trailers. |
| X | Exit locations for outdoor events that are fenced and/or locations with tents and tent structures. |
| X | Description of all event components required to meet ADA accessibility standards |
| | Other related event components or information not listed above. |
| Ente | ertainment and Related Activities |
| follow perfor | No 🗹 Are there any musical entertainment features related to your event? If yes, please complete the ring information or provide an attachment listing all bands/performers, type of music, sound check and rmance schedule. Ser of Stages: Number of Performers/Bands: |
| Perfor | mer/Band name and music type: |
| | |
| Yes | No Will sound amplification be used at your event? |
| | Start time: Finish time: |
| | e describe the sound equipment that will be used for your event? |
| Yes [| No Will sound checks be conducted prior to the event? |
| If yes, | Start Time: Finish Time: |
| Yes _ | No Will hot air balloons, fire lanterns or similar devices be used at your event? If yes, please describe: |
| | No Will your event include the use of any signs, banners, decorations, or special lighting? If yes, |
| please | e describe: Banners used on the start/finish line |

General Rules for Application

| х | A Special Event Permit is required for an outdoor venue open to the | to block pedestrian or vehicular traffic, or the use of private property public. |
|---|--|--|
| | | proved for a recurring event at the same location on multiple dates no changes are made to the site plan and/or traffic control plan. |
| x | • | ced according to the Manual on Uniform Traffic Control Devices equirements for any type of road or lane closure. |
| x | • | al Events Unit (918) 586-6054 / (918) 586-6067 must be contacted vent-related traffic control for any type of moving route. |
| | Contact Emergency Medical Service | es Authority (EMSA) for medical stand-by. |
| x | Public rights-of-way must not be al from damage during your event. | tered. Streets, sidewalks, trees, plants and buildings must be protected |
| X | Glassware is not allowed on-site for | r any outdoor events. |
| X | Notification to impacted entities w | rithin 300 feet is required for all events (See below). |
| X | Applicants must remove all trash a | nd debris immediately following their event. |
| | If sales will take place at your ever business days prior to the event: | t, you must provide the following documentation online fifteen (15) |
| 3 | telephone number. Oklahoma Vendors. Submit copies must display copies of sales tax pe Out of State Vendors. If out of stat special event sales tax permit from the City of Tulsa. To obtain a speci Commission Special Events Division | e vendors will be making sales at the event, you must obtain a the Oklahoma Tax Commission and submit a copy of the permit to al event sales tax permit, please contact the Oklahoma Tax |
| x | • | Iheld chalk and/or tape are the only allowed means of marking start/nd placement of tents, vendors, barricades, etc. unless approved. |
| X | Event venues must comply with al | ADA accessibility regulations. |
| | | to trespass on private, county, state or federal property. You will ou have permission to use such property. |
| х | | f Officer of the Host Organization authorizing the applicant zer to apply for this Special Event Permit on their behalf must be |
| x | • | me, first served basis. If a scheduling conflict occurs, preference will ed annual events operating on the customary event date(s). |
| | The City of Tulsa must not be inclu | ded as a sponsor of the event unless authorized in writing. |

General Rules for Application

| X | Any Special Event which necessitates the closing or using a street or sidewalk, venue for carnival or circus, police escort or traffic control, or any Special Event which includes the serving or consumption of alcoholic beverages and/or beer must carry a policy of liability insurance in the amount \$1,000,000.00. Such insurance policy should be issued by an insurance company licensed to do business in the State of Oklahoma. A certificate of such insurance coverage, naming the City of Tulsa (175 E. 2nd St., Tulsa OK 74103) as Additional Insured, must be on file with the City of Tulsa fifteen (15) business days prior to the event. List the name and date of event on the certificate of insurance. |
|---|---|
| | In most cases, issuance of a Special Event Permit will serve as your approval to use amplified sound within the event venue as outlined in your permit application. Sound levels should not exceed 90 decibels 15 feet from the source. Sound levels may have to be lowered between 11 p.m. and 7 a.m. |
| | Tents/canopies or grouping of tents over 400 square feet require a tent permit. A tent permit must be obtained before erecting a tent. Tent stakes driven into the ground, street, sidewalk, or tent straps attached to poles are prohibited on public property. The Tent Permit Application (918) 596-9601 requires submittal fifteen (15) business days prior to the event. Review Tent/Canopy requirements . |
| | <u>City</u> , <u>County</u> (20-day County Beer Permit process) and <u>State</u> Special Event Beer Permits are required to sell low-point beer outdoors on public property and includes private property (shared parking lot) adjacent to a business. Submit all permits fifteen (15) business days prior to the event. Review <u>Special Event Beer Application requirements</u> . |
| | A <u>Special Event Alcohol Beverage License</u> is required to sell or serve high-point beer or alcohol outdoors on public property and includes private property (shared parking lot) adjacent to a business. The Oklahoma Alcoholic Beverage Laws Enforcement Commission (ABLE) (405) 521-3484 requires the submittal of the Public Event License application sixty (60) days prior to the event. Once received, present the ABLE License to the City of Tulsa Business License Office (918) 596-7640 and obtain a Special Event City Beverage License. Provide your plans to the Special Events Coordinator for outdoor alcohol premise enforcement prior to the event. Review <u>Beer Garden requirements</u> . |
| | Rules for discharges into the storm sewer are stated in <u>Chapter 5 Pollution ordinance</u> , <u>section 502</u> , <u>B. subsection 1.d.</u> Prohibited discharges "Any material that is disposed of or dumped in such a manner that causes pollutants to be discharged." This includes, but is not limited to, paints, process wastewater and liquids other than uncontaminated water. Violations of the pollution ordinance carry fines up to \$1000.00 per violation. |
| | Contact the <u>Tulsa Health Department</u> (918) 595-4361 for requirements related to food or beverage sales at the event. |
| | There is no permit required for a Drone within the City limits; however, all FAA regulations must be followed. Please review the <u>Best Management Practices</u> . Please <u>register</u> your Drone and send a copy of the license to the Special Events Coordinator. |
| х | Your permit may be revoked for any of the following: Fraud, misrepresentation, failure to obtain required secondary permits, imminent threat to public health, safety and/or welfare. If your permit is revoked, future permit requests may be denied. |

Mitigation of Impact_

| Please describe your plan for cleanup and event: Volunteer crew will collect trash | | | | |
|--|--|--|--|---|
| Number of Trash Receptacles: 15 Nu | | | | |
| Yes No V Using Clean Up Service? Pr | ovider and Phor | ne: | | |
| Equipment Setup: Date:Ti | me: E | quipment Pickup: | Date: | Time: |
| Yes No 🗹 Have you presented your e | event concept to | the officially rec | ognized communit | ty groups that |
| represent the venue area? If yes, please a no, please explain: Pending | attach letters of | endorsement or s | support from each | of these groups. If |
| Yes No Make you met with the resemay be directly impacted by your event? explain: Pending | | | | |
| Yes No Do you have a sample of the weeks prior to your event? If yes, please | • | • • | • | acted entities two |
| Affidavit of Applicant | | | | |
| I certify that the information contained in the That I have read, understand, and agree to a with all requirements of the City, County and and be financially responsible for any costs a agree to indemnify and hold harmless the City from any claims (including cost of defending understand that a Permit does not excuse m City Event personnel, or emergency workers based upon injuries sustained at, or in conju | abide by the rule d State, and any c and fees that may ty of Tulsa, and al such claims) or d y failure to comp s, and does not p | s and regulations gother regulatory en be incurred by the l City of Tulsa office amages that may ally with orders of la rovide immunity front and sold and the largest and sold and the largest and la | governing this Even tity related to this E City of Tulsa due to ers, employees, ager rise from activities re w enforcement pers | t. I agree to comply event. I agree to pay the Event. I further ats, representatives, elated to the Event. I sonnel, firefighters, |
| Print Name: Melinda Loftis | Signature: _ | Melinda L | <i>oftis</i> Dat | e: <u>8/7/17</u> |
| Mail to: Special Events Coordinator. Y | or, 175 E. 2nd St | ., Ste. 590, Tulsa, | ŎК 74103, (918) 5 | 576-5636 or |
| For City of Tul | sa Special Eve | nts Committee | Use Only | |
| Date received: 08.07.2017 Date | routed:08.2 | 3.2017 _[| Date for review: 08 | 3.30.2017 |
| Special Events Committee Recommendat | ion: | Pending Y | res No08. | 16.2017 |
| Date routed to Mayor:08.23.2017 | Mayor's Reco | ommendation: \ | res 🗌 No 🗌 | |
| Date routed to Council: 08.23.2017 | City Council / | Approval: | /es | |
| Date Permit Issued: | Comments: _ | | | |

Thank you for completing your Special Event Permit Application. Before you submit your application to the City of Tulsa, please make sure that the following steps have been completed:

| Have | you? |
|-----------------|--|
| | Reviewed the general rules of the application? |
| | Signed (if to be mailed) and dated your application? |
| | Attached a written communication from the Chief Officer of the Host Organization authorizing |
| | the applicant and/or professional event organizer to apply for this permit on their behalf? |
| | Attached your event site map? |
| | Attached your event moving route map? |
| | Attached your event security, communication and contingency plan? |
| | Attached your event medical, communication and contingency plan? |
| | Attached your event traffic control plan/map? |
| | Attached your event parking plan/map? |
| | Attached your event shuttle plan/map? |
| | Attached your event valet plan/map? |
| | Attached a complete entertainment list and schedule? |
| | Attached a complete parade entry list and guidelines? |
| | Attached a list of entities and community groups impacted by your event that were notified |
| | and/or provided letters of support or endorsement? |
| | Attached notice of communications that will be distributed to residents, businesses, schools, |
| | places of worship and other entities impacted by your event? |
| | Attached written permission from the owners, if using private property? |
| | Attached your Certificate of Insurance? |
| Please submi | t the following documents to the City of Tulsa (if applicable) at least fifteen (15) business days |
| prior to the ev | vent: |
| | Copy of your tent permit(s). |
| | Copies of your three (3) low-point beer licenses (City, County and State). |
| | Copies of your high-point beer/alcohol licenses. (City and ABLE) |
| | Copy of your park permit. |
| | Copy of your fireworks/fire permit(s). |
| | A list of Oklahoma and out-of-state vendors on-site at the event and copies of sales tax |
| | permits required. |
| | Proof of Drone registration with the FAA. |



USATF Certification

Parkview Baptist Church 5k Tulsa, OK – 5,000 meters

Effective Dates



Start/Finish: On 60th St, 2.3 m W of the storm drain on the north side of the street, just E of the rear Parking Lot entrance for Parkview Baptist Church.

1k & 4k: On 72nd E Ave, 1 meter N of the Fire Hydrant at the corner of 72nd E Ave & 72nd E Ave (Cul De Sac).

1st Turnaround: On 57th St, directly in line with the stop sign on the NW corner of 57th and 75th E Ave.

2k: Exact point TBD

2nd Turnaround: Near intersection of 53rd PI and 75th Ave. Exact Location TBD

3k: Exact point TBD

