

City of Tulsa SPECIAL EVENT PERMIT APPLICATION

Summary of Event

Name of Event: <u>B</u>	rookside Block Party at the Ballet	Date(s) of Event: <u>9/20/18</u>		
Location Address:	<u>1212 E 45TH PL S</u>	Council District(s): 9		
Event Description: Free event in parking lot featuring live music, food trucks, etc				
Event Category: Festival/Celebration				
Event Includes:	Amplified Sound, Generator/Electricity, Beer/Alcohol Sales, Live Entertainment, Food Sales, Merchandise Sales, Private Property			
Anticipated Attendance: Total: <u>300</u>		Per Day: <u>300</u>		
Anticipated Partici	pants: Total: <u>0</u>	Per Day: <u>0</u>		
Number of Events for Monthly Event: NA				

Host Organization, Applicant and Professional Event Organizer Information

Host Organization:	Tulsa Ballet Theatre Inc	Website: www.tulsaballet.org
Chief Officer of Host Organization	: <u>Scott Black</u>	
Email and Phone:	<u>918-749-6030</u>	
Applicant Name:	Katie Grassmyer	
Email and Phone:	katie.grassmyer@tulsaballet.org	<u>918-749-6030</u>
Professional Event Organizer:	NA	
Email and Phone:		
On-site Contact:	Katie Grassmyer	Mobile: <u>918-749-6030</u>
Billing Contact:	TULSA BALLET THEATRE INC	Phone: <u>918-749-6030</u>
Billing Address:	<u>1212 E 45th PI S</u> Tulsa OK 74105-4508	

Event Timeline and Lane/Street Closure Information

Event Setup:	Date: 09/20/2018	Time: <u>12:00 p.m.</u>
Street Closure for Event Setup:	Date:	Time:
Street(s) to be Closed for Event Setup:	NA	
Event Start:	Date: 09/20/2018	Time: <u>5:00 p.m.</u>
Street Closure for Event Start:		Time:
Street(s) to be Closed for Event Start:	<u>NA</u>	
Run, Walk, Parade Start Time:	NA	
Daily Event Hours: <u>5:00 to 8:00 p.m.</u>		
Event End:	Date: 09/20/2018	Time: <u>8:00 p.m.</u>
Street Reopens after Event End:	Date:	Time:
Event Teardown:	Date: 09/20/2018	Time: <u>8:00 p.m.</u>
Street Reopens after Event Teardown:	Date:	Time:

Secondary Permits Required

Beer Sales, Alcohol Sales:	Lov	v point Beer Sales			
Number of Food Vendors:	0				
Number of Food Trucks:	<u>3</u>				
Food Cooked on-site: No		Fuel(s) to be used:			
Number of Item Vendors:	3	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: No					

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

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

Security and/or Police: Contact, Email a	and Phone: <u>Dia</u>	mond Security, 918-591-2599, Brandi 91	<u>18-810-0383)</u>			
Medical and/or First Aid Services: Contact, Email and Phone: <u>On-site First Aid Kit - Tulsa Ballet,</u> katie.grassmyer@tulsaballet.org, 918-749-6030						
Traffic Control Barricade Company: Contact, Email and Phone: NA						
Equipment Setup: Date:	Time:	Equipment Pickup: Date:	Time:			
Crowd Management Fencing Company: Contact, Email and Phone: NA						
Equipment Setup: Date:	Time:	Equipment Pickup: Date:	Time:			
Parking Type: ADA parking available, Paved Lot						
Transportation Service: No service						
Transportation Service: Contact, Email and Phone: <u>NA</u>						

Sponsor and Other Event Information

Event Sponsor(s): Tulsa Ballet				
Name of Park and Location, if applicable:	<u>NA</u>			
Drone: <u>No</u>				
Portable Toilets: Provider and Phone:	<u>NA</u>			
Total Number of Portable Toilets: <u>0</u> Number of ADA Accessible Portable Toilets: <u>0</u>				
Equipment Setup: Date:	Time:			
Equipment Pickup: Date:	Time:			
Other information: <u>NA</u>				

Entertainment and Related Activities

Number of Stages: 1 Number of Performers/Bands: 1						
Performer/Band name and music type: Live band - act not yet confirmed						
Sound Amplification: Yes	<u>4:30 p.m.</u>	Finish Time:	<u>7:30 p.m.</u>			
Please describe the sound equipment the	nat will be used for your e	event:				
TBD						
Sound checks conducted prior to the even	ent: <u>Yes</u>	Start Time:	4:30 p.m Finish Tir	me: <u>5:00 p.m.</u>		
Describe hot air balloons, fire lanterns o	r similar devices used at	event:				
NA						
Describe the use of any signs, banners,	decorations, or special I	ighting used	at event:			
NA						
Mitigation of Impact						
Please describe your plan for cleanup a	nd removal of recyclable	goods, was	te and garbage durin	ig and after your		

Please describe your plan for cleanup and removal of recyclable goods, waste and garbage during and after your event: Staff will walk through and clean up during and after the event. Building crew to clean up after.

Number of Trash Receptacles: <u>4</u> Number of Du	npsters: <u>2</u> Number of Recycling Containers: <u>0</u>
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Cleanup Service Provider and Phone, if applicable: Clean Sweep, 918-812-7723

Equipment Setup: Date:	Time:	Equipment Pickup: Date:	Time:
Presented Event Concept to:			

Businesses

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:	07.06.2018	Date routed:	09.01.2	018	Date for review:	09.12.2018	
Special Events	Committee Recom	mendation:			□ Yes □ No		
Date routed to N	Mayor:		Mayor's	s Recomm	endation:		□ Yes □ No
Date routed to 0	Council:		Cit	y Council <i>i</i>	Approval:		□ Yes □ No
Date Permit Iss	ued:	Com	ments:	Form rev	ised 09.01.2018.		

