

City of Tulsa Special Event Permit Application

Page 1 of 3

<u>Summary of Even</u>	<u>nt</u>				
Event Title:	Date of Event:				
Event Location:		Council Dist	ict:		
Event Description:		(Submit Flyer or	(Submit Flyer or Brochure in Electronic Format)		
Event Sponsors:					
Anticipated Attenda	nce (participants, staff, vend	ors, crowd, etc.): Total:	Per Day:		
Event Organizer	Information				
Organizing Agency:		Web Address:			
		Email Address:			
On-Site Contact:		On-Site Phone:			
Billing Contact:		Billing Phone:			
Billing Address:	Street	<i>C</i> :-	0		
			State Zip		
Site Plan and Ro					
Event Set-up:	Date:	Day of Week:	Time:		
	et-up, Stages, Tents, etc.:		Time:		
Street(s) to be Close	d:				
		(Submit a Site N	(1 ap in CAD/Electronic Format)		
			Time:		
	ace, Parade, Festival, etc.:		Time:		
Street(s) to be Close	d:				
		(Submit Route N	(ap in CAD/Electronic Format)		
Race, Parade, or Esc	ort Start Times:				
Daily Festival or Str	eet Party Times:				
Road Race Service C	Co. and Phone:				
Event Closes:	Date:	Day of Week:	Time:		
Street Opening:	Date:	Day of Week:	Time:		
Event Dismantle:	Date:				
Street Opening:	Date:	Day of Week:	Time:		

Page	2	of 3	
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Secondar	y Permit Red	auirements
Secontati		

Yes No Is this an Open Air Event?	Public Property	Private Property	Parking Lot
Yes No Alcohol or Beer On-Site?	Alcohol Sales	Beer Sales	Free Beverages
Yes No Concessionaires On-Site?	Number of Food Ve	ndors: Number	of Item Vendors:
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?		1:	
Yes No Using a City or River Park?	Name and location:		
Security, Medical, Traffic, and Park			
Yes No Security or Police On-Site?	Agency and Phone:		
If yes, please describe or provide an attacht			
Yes No Medical First Aid On-Site?	Agency and Phone:		
If yes, please describe or provide an attach	ment of your plan:		
Yes No Using Barricade Company?	Agency and Phone:		
If yes, the Barricade Co. providing equipme	nt for the street closure	must submit the plan in	CAD/Electronic Format.
Equipment Setup: Date: Tim	e: Equipmer	nt Pickup: Date:	Time:
Yes No Is there Parking Available?	If yes, please describ	be or provide an attachr	nent of your plan:
Yes No Is there Disabled Parking?	If yes, please describ	be or provide an attachr	nent of your plan:
Yes No Using a Shuttle Service?	If yes, please describ	be or provide an attachr	nent of your plan:
Other Related Activities and Informa	ition		
Yes No Entertainment On-Site?	Live Music	Recorded Music	Dancing
Fireworks Inflatables	Animals	Other (specify):	
Yes No Sound Amplification?		~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	T ¹ 1 T ¹
	Setup Time:	Start Time:	Finish Time:
Yes No Certificate of Insurance?			Finish Time:
Yes No Certificate of Insurance? If yes, submit certificate. If no, please expla	Agency and Phone:		
	Agency and Phone:		
If yes, submit certificate. If no, please expla	Agency and Phone:		

Please describe your plan for cleanup and removal of waste and garbage during and after your event:

Number of Trash Receptacles: No Yes No Using a Sanitation Service Equipment Setup: Date: Tir	e? Agency and Phone:		
Equipment Setup: Date: Tir			
		III PICKUP. Dale.	Time:
Yes No Have you presented your ev			
If yes, please attach a complete list of the	-		
Yes No Do you have a sample of th	he notice that you propo	se to distribute two week	s prior to your event?
If yes, please attach in an electronic forma	at. If no, please explain	:	
Yes No Other Information?			
Affidavit of Applicant			
Tulsa Police officers and public safety services, and control, and security. The Organizing Agency has including, but not limited to, Curfew Ordinance, Ci application approval does not imply City sponsors I certify that the information contained in the foreg read, understand, and agree to abide by the rules and of the Organizing Agency, am also authorized to c fees that may be incurred by or on behalf of the Ev	d traffic-control signage and l s the responsibility to be awa ity/County Public Health Reg ship. Review the instructions going application is true and id regulations governing the p commit that agency, and ther yent to the City of Tulsa and	parricades will be required for are of and comply with City (gulations, and Police/Park Pub for further information in ref correct to the best of my know proposed Special Event. I furth efore agree to be financially re Police Department. Any omis	street closings, traffic/crowd Drdinances and Regulations lic Safety Requirements. An erence to Special Events. vledge and belief that I have er certify that I, on the behalf esponsible for any costs and sions will delay the process.
Print Name:	Signature:		Date:
Mail to: Special Event Coordinating O Or Email to: <u>sbain@citvoftulsa.org</u> . Y For City of Tulsa Spec	Your electronic submis	sion will serve as your	electronic signature.
Date received: Date		0	-
If any agency feels there are any problems with this this date: If any problems stating the solution or reason for the objection should OK 74112. For further information or discussion,			
Special Event Coordinating Committee R	Recommendation: Pe	ending Yes No :	
Date routed to Mayor:	Mayor's Recommen	idation: Yes_No_:	
Date routed to Mayor: Date routed to Council:			