

City of Tulsa SPECIAL EVENT PERMIT APPLICATION

Summary of Event

Name of Event: Night Light Tulsa		Date(s) of Event: April 2, 9, 16, 23, 30, 2020		
Location Address:	202 N MAYBELLE AVE W	Council District(s): <u>4</u>		
Event Description: <u>Night Light Tulsa is a weekly outreach that serves Tulsa's homeless and low income</u> communities. We have been serving since September 2013. This permit is for every Th in April 2020. Volunteers from across Tulsa and surrounding communities come to parti				
Event Category: Miscellaneous				
Event Includes:	Generator/Electricity, Public Right of Way, Open F Street Closure	Tame, No Parking Signage, Sidewalk Closure,		
Anticipated Attendance: Total: <u>350</u>		Per Day: <u>350</u>		
Anticipated Participants: Total: <u>350</u>		Per Day: <u>350</u>		
Number of Events for Monthly Event: 5				

Host Organization, Applicant and Professional Event Organizer Information

Host Organization:	The City Lights Foundation of Oklahoma	Website: https://citylightsok.org/			
Chief Officer of Host Organization	: <u>Sarah Grounds</u>	Sarah Grounds			
Email and Phone:	sarah.grounds@citylightsok.org §	918-991-9599			
Applicant Name:	The City Lights Foundation of Oklahoma				
Email and Phone:	sarah.grounds@citylightsok.org 918-991-9599				
Professional Event Organizer:	Same				
Email and Phone:					
On-site Contact:	<u>Tyler Parette</u>	Mobile: <u>918-510-9713</u>			
Billing Contact:	The City Lights Foundation of Oklahoma	Phone: <u>918-991-9599</u>			
Billing Address:	<u>7204 S. Birch Ave.</u> BROKEN ARROW OK 74011				

Event Timeline and Lane/Street Closure Information

Event Setup:	Date: 04/02/2020 Time:	<u>6:15 pm</u>
Street Closure for Event Setup:	Date: 04/02/2020 Time:	<u>6 pm</u>
Street(s) to be Closed for Event Setup:	Reconcilliation Way between M bridge	aybelle Ave and Katy Trail under the
Event Start:	Date: 04/02/2020 Time:	<u>6:30 pm</u>
Street Closure for Event Start:	Date: 04/02/2020 Time:	<u>6 pm</u>
Street(s) to be Closed for Event Start:	Reconcilliation Way between M	aybelle Ave and Katy Trail under the
Run, Walk, Parade Start Time:	<u>NA</u>	
Daily Event Hours: 6:30 to 9:30 pm		
Event End:	Date: 04/30/2020 Time:	<u>9:30 pm</u>
Street Reopens after Event End:	Date: 04/30/2020 Time:	<u>10 pm</u>
Event Teardown:	Date: 04/30/2020 Time:	<u>9:30 pm</u>
Street Reopens after Event Teardown:	Date: 04/30/2020 Time:	<u>10 pm</u>

Secondary Permits Required

Beer Sales, Alcohol Sales:	<u>Not</u>	Applicable			
Number of Food Vendors:	0				
Number of Food Trucks:	0				
Food Cooked on-site: Yes		Fuel(s) to be used: Gas			
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: No					

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

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

Security and/or Police: Contact, Email and Phone: Midnight Reun Services LLC Chris (918)b895-6779 Medical and/or First Aid Services: Contact, Email and Phone: We don't use medical services but do have a physician and RN on volunteer staff. We also have First Aid kits and AED on site. Traffic Control Barricade Company: Contact, Email and Phone: We own our barricades. Equipment Setup: Date:04/02/2020 Time: 6 pm Equipment Pickup: Date: 04/30/2020 Time: <u>10 pm</u> Crowd Management Fencing Company: Contact, Email and Phone: NA Equipment Setup: Date: Time: Equipment Pickup: Date: Time: Parking Type: <u>Street</u> Transportation Service: No service Transportation Service: Contact, Email and Phone: NA

Sponsor and Other Event Information

Event Sponsor(s): City Lights Foundation	of Oklahoma
Name of Park and Location, if applicable:	NA
Drone: <u>No</u>	
Portable Toilets: Provider and Phone:	<u>Aim to Please</u> (918) 606-5675
Total Number of Portable Toilets: <u>2</u>	Number of ADA Accessible Portable Toilets: <u>1</u>
Equipment Setup: Date: 04/02/2020	Time: <u>6 pm</u>
Equipment Pickup: Date: 05/01/2020	Time: <u>10 am</u>
Other information: Portable toilets remo	oved every Friday morning following the event each Thursday Night.

Entertainment and Related Activities

Number of Stages: 0	Number of Performers/Bands: 0				
Performer/Band name and music type: <u>NA</u>					
Sound Amplification: No	Start Time:	Finish Time:			
Please describe the sound equipment that will be used for your event:					
NA					
Sound checks conducted prior to the event: <u>No</u> Start Time: Finish Time:					
Describe hot air balloons, fire lanterns or similar devices used at event:					
NA					
Describe the use of any signs, banners, decorations, or special lighting used at event:					
NA					

Mitigation of Impact

Please describe your plan for cleanup and removal of recyclable goods, waste and garbage during and after your event: We have a group that cleans the bridge before we begin. Once our service time tarts, we have a group of approximately 12 that picks up trash under the bridge, down the street and to the Day Center and Iron Gate. The area is inspected at the end of the night. All trash is loaded and taken to a dumpster at our building. We will occasionally take pictures to verify that the area is always better when we leave than when we arrived. You may contact me for those pictures.

Number of Trash Receptacles: 6	Number of Dump	sters: <u>0</u>	Number of Recycling Cont	ainers: <u>0</u>
Cleanup Service Provider and Phone, i	f applicable: <u>NA</u>			
Equipment Setup: Date:	Time:	Equipment P	ickup: Date:	Time:
Presented Event Concept to:				

Other entities

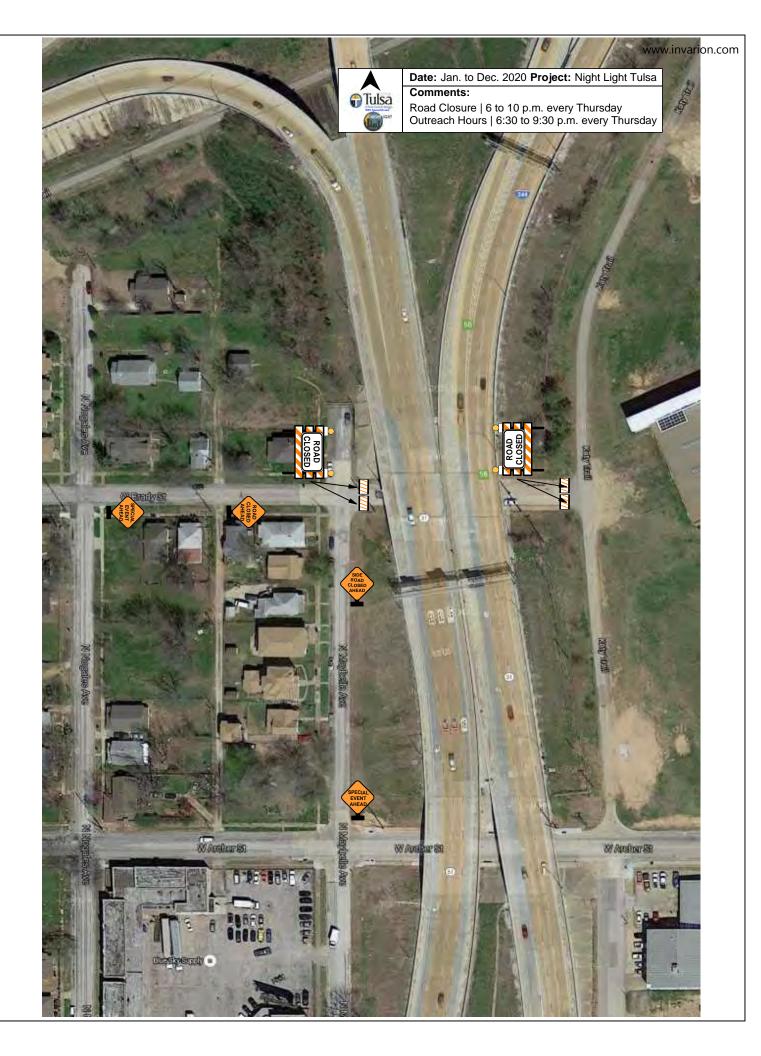
Avidavit of Applicant

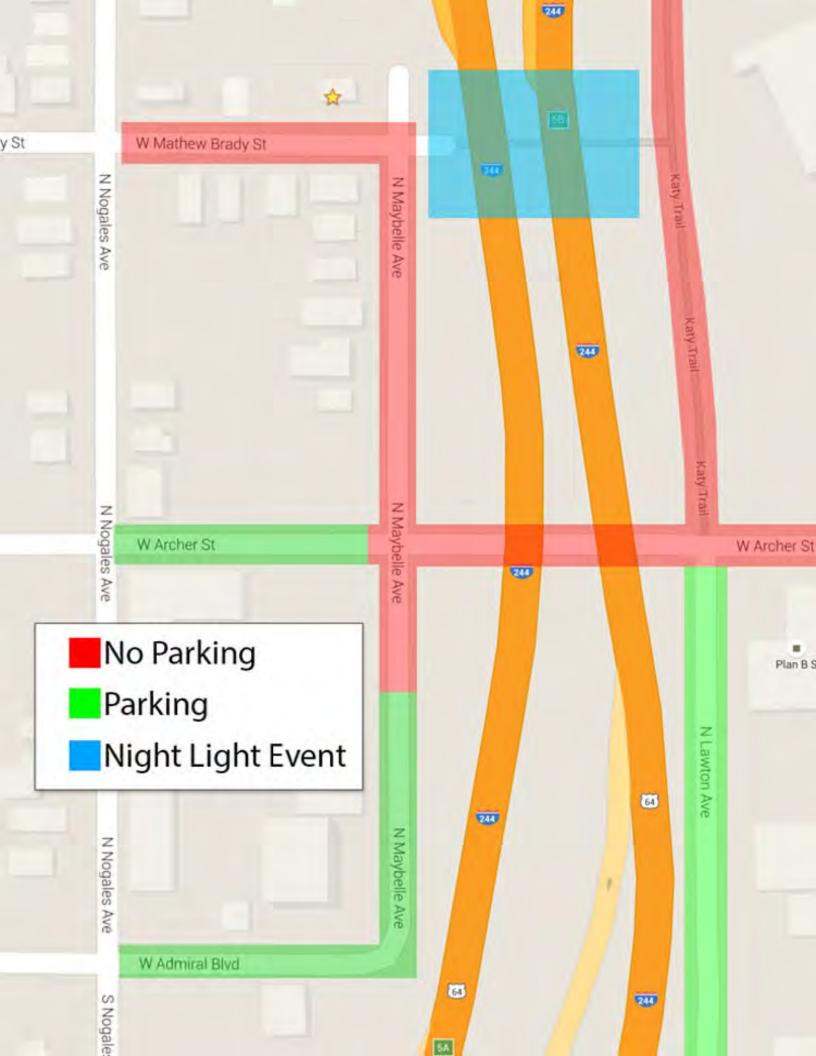
I certify that the information contained in this Application is true and correct to the best of my knowledge and belief. That I have read, understand, and agree to abide by the rules and regulations governing this Event. I agree to comply with all requirements of the City, County and State, and any other 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

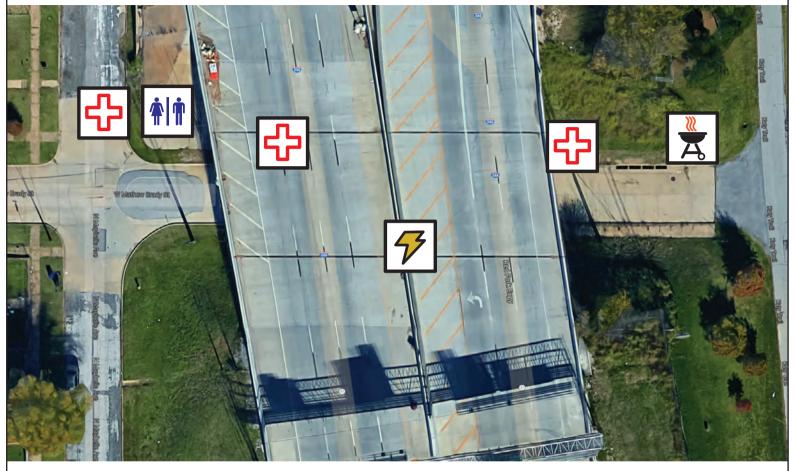
For City of Tulsa Special Events Committee Use Only

Date received:	02/24/2020	Date routed:	02/27/	2020	Date for review:	03/11/2020	
Special Events	Committee Recon	- nmendation:			🗆 Yes 🗆 No		
Date routed to M	layor:		Mayor'	s Recomme	endation:		□ Yes □ No
Date routed to C	Council:		Ci	ty Council A	Approval:		□ Yes □ No
Date Permit Issu	ued:	Com	ments:	Form revi	sed 02/27/2020.		











First Aid



Food Preparation



***** Portable Restrooms



Generator