

# **City of Tulsa** SPECIAL EVENT PERMIT APPLICATION

## Summary of Event

		Date(s) of Event: <u>September 3, 10, 17, 24,</u> 2020		
Location Address:	202 N MAYBELLE AVE W	Council District(s): 4		
Event Description	: <u>Night Light Tulsa is a weekly outreach that serves</u> <u>communities. We have been serving since Septer</u> in May 2020. Volunteers from across Tulsa and se	nber 2013. This permit is for every Thursday		
Event Category: Miscellaneous				
Event Includes:	Generator/Electricity, Public Right of Way, Open I Street Closure	Flame, Lane Closure, No Parking Signage,		
Anticipated Attend	lance: Total: <u>600</u>	Per Day: <u>150</u>		
Anticipated Participants: Total: <u>100</u>		Per Day: <u>20</u>		
Number of Events for Monthly Event: <u>4</u>				

### Host Organization, Applicant and Professional Event Organizer Information

Host Organization:	The City Lights Foundation of OklahomaWebsite: https://citylightsok.org/				
Chief Officer of Host Organization	: <u>Sarah Grounds</u>				
Email and Phone:	sarah.grounds@citylightsok.org	918-991-9599			
Applicant Name:	Sarah Grounds				
Email and Phone:	sarah.grounds@citylightsok.org	918-991-9599			
Professional Event Organizer:	Same				
Email and Phone:					
On-site Contact:	Sarah Grounds	Mobile: <u>918-991-9599</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: <u>09/03/2020</u>	Time: <u>6 pm</u>
Street Closure for Event Setup:	Date: 09/03/2020	Time: <u>6 pm</u>
Street(s) to be Closed for Event Setup:	Reconciliation Way from	m Maybelle Ave, through/under the bridge, to
	Katy Trail	
Event Start:	Date: 09/03/2020	Time: <u>6:30 pm</u>
Street Closure for Event Start:	Date: 09/03/2020	Time: <u>6 pm</u>
Street(s) to be Closed for Event Start:	<u>Reconciliation Way from</u> Katy Trail	m Maybelle Ave, through/under the bridge, to
Run, Walk, Parade Start Time:	<u>NA</u>	
Daily Event Hours: Every Thursday 6:30 - 9	<u>9 pm</u>	
Event End:	Date: 09/24/2020	Time: <u>9 pm</u>
Street Reopens after Event End:	Date: 09/24/2020	Time: <u>9:30 pm</u>
Event Teardown:	Date: 09/24/2020	Time: <u>9 pm</u>
Street Reopens after Event Teardown:	Date: 09/24/2020	Time: <u>9:30 pm</u>

## Secondary Permits Required

Beer Sales, Alcohol Sales:	Not	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 Run Security (918) 895-6779 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 several first aid kits and an AED on site. Traffic Control Barricade Company: Contact, Email and Phone: We own our barricades. Equipment Setup: Date:09/03/2020 Time: 6 pm Equipment Pickup: Date: 09/24/2020 Time: 9:30 pm Crowd Management Fencing Company: Contact, Email and Phone: NA Equipment Setup: Date: Time: Equipment Pickup: Date: Time: Parking Type: Street 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 Loca	ation, if applicable:	NA				
Drone: <u>No</u>						
Portable Toilets: Pro	vider and Phone: <u>A</u>	<u> Aim to Please (918) 606-5675</u>				
Total Number of Portab	le Toilets: <u>2</u>	Number of ADA Acc	cessible Portable Toilets: <u>1</u>			
Equipment Setup: Date	e: <u>09/03/2020</u>	Time: <u>5:30 pm</u>				
Equipment Pickup: Date	e: <u>09/25/2020</u>	Time: <u>10 am</u>				
Other information: P	ortable toilets remov	ed every Friday morning follo	wing 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 u	sed for your event:		
NA			
Sound checks conducted prior to the event: No	Start Time:	Finish Time:	
Describe hot air balloons, fire lanterns or similar de	vices used at event:		
NA			
Describe the use of any signs, banners, decorations	s, or special lighting used at ev	vent:	
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 starts, 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 better when we leave it than how we found it. You may contact me for those pictures.

Number of Trash Receptacles: 6	Number of Dumps	sters: <u>0</u>	Number of Recycling Cont	ainers: <u>0</u>
Cleanup Service Provider and Phone, if	applicable:			
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:	08/17/2020	Date routed:	08/18/2	2020	Date for review:	08/26/2020	
Special Events (	Committee Recorr	mendation:			🗆 Yes 🗆 No		
Date routed to M	layor:		Mayor's	s Recomm	endation:		🗆 Yes 🗆 No
Date routed to C	Council:		Cit	ty Council /	Approval:		□ Yes □ No
Date Permit Issu	ied:	Com	ments:	Form rev	ised 08/18/2020.		



