

# **City of Tulsa** FILM PERMIT APPLICATION

#### Summary of Production

Production Title: <u>Power of a Plan</u>	Date(s) of Project: <u>09/20/20 - 09/25/20</u>			
Location: Starting Address: <u>10109 E. 79th St.</u>	Council Districts: 4, 7			
Ending Address: <u>1011 E. 20th St.</u>				
Film Description: This is a commercial filming at the Cancer Treat residence. We will be using one camera and sor brand awareness and help more cancer patients	ne lighting on location. Our hope is to create			
Production Category: Commercial,				
Production Includes: Private Property,				
Number of Crew/Cast: <u>30</u> Number of Crew/Cast Vehicles: <u>10</u>	Number of Equipment Vehicles: 3			
Due de césar Manager Anglia est en de castie a Manag				

## Production Manager, Applicant and Location Manager Information

Production Company:	Cancer Treatment Centers of America Global	Website:		
Production Manager:	Caleb Mixon			
Email: caleb.mixon@ctca-hope.com Phone: 561-923-324				
Applicant Name:	Caleb Mixon			
Email: caleb.mixon@ctca-hope.com Phone: 561-923-3241				
Location Manager:	Joe Wright			
Email: jarielwright@gmail.com Phone: 918-704-5363				
On-site Contact:	Caleb Mixon	Mobile: 407-312-9950		
Billing Contact:	Cancer Treatment Centers of America Global, Inc.	Phone: 561-923-3241		
Billing Address: 5900 Broken Sound Parkway NW , Boca Raton FL 33487				

### Event Timeline and Lane/Street Closure Information

Production Starts:	Date: 09/25/2020	Time: <u>8:00 am</u>	
Street Closure for Production Start:	Date:		
Street(s) to be Closed for Production Start:	<u>NA</u>		
Intermittent Traffic Control Only:	Date:	Time:	
Street(s) to be Used for Intermittent Traffic (	Control Only: <u>NA</u>		
Production Ends:	Date: <u>09/25/2020</u>	Time: <u>8:00 pm</u>	
Street Reopens after Production Ends:	Date:	Time:	
Using Traffic Control Barricade Company?	No Contact, EMail and	<u>d Phone: NA</u>	
Equipment Setup: Date: Tim	e: Equipment Pi	ckup: <u>Date:</u>	Time:

### Secondary Permits Required

Use of fireworks, rockets, lasers, or	r other pyrotechnics: <u>No</u>
Provider and Phone: NA	
Drone: <u>No</u> Drone Ope	rator:
Use of any signs, banners, decorat	tions, or special lighting: No <u>NA</u>
Crew/Cast Parking Type: Street	
City, County, River or Private Park:	: <u>No</u> Name of Park and Location: <u>NA</u>
Portable Toilets: Yes	Provider and Phone: <u>At Your Service (918) 272-0568</u>
Equipment Setup: Date: 09/24/202	20 Time: <u>6:00 pr</u> Equipment Pickup: Date: <u>09/25/2020</u> Time: <u>8:00 pm</u>
Security/Police: No	Contact and Phone: <u>NA</u>
Medical/First Aid Services: Yes	Contact and Phone: TBD
Fire Department: <u>No</u>	Contact and Phone: <u>NA</u>

#### Mitigation of Impact

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

We will have trash bags and production assistance to leave the residence better than we found it.

Number of Trash Receptacles: <u>2</u> Number of Dumpsters: <u>0</u> Number of Recycling Containers: <u>1</u>

Presented Event Concept to: <u>Tulsa Film Office, private resident and CTCA.</u>

#### 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:	09/04/2020	Date routed:	09/09/2020	Date for	review:	_	Email Review
Special Events	Committee Recom	mendation:		Pending:	Yes 🔲	No 🔲	
Date routed to N	layor:		Mayor's Recomm	nendation:	Yes 🔲	No 🔲	
Date routed to 0	Council:		City Council Appr	oval:	Yes 🛛	No 🔲	
Date Permit Iss	ued:		Comments: Form revised 09/09/2020.				