

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

#### Summary of Event

Name of Event:Monte Cassino Fun RunDate(s) of Event:October 6, 2022Location Address:2206 S LEWIS AVE ECouncil District(s):4Event Description:Fun Run for studentsEvent Category:Procession/MarchEvent Includes:Public Right of Way, Lane Closure, Sidewalk Closure, Private Property, Street ClosureAnticipated Attendance:Total:700Anticipated Participants:Total:700Number of Events for Monthly Event:NA

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

Host Organization:	Monte Cassino School	Nebsite: https://www.montecassino.org/					
Chief Officer of Host Organization							
Email and Phone:	<u>216-225-8806</u>						
Applicant Name:	Monte Cassino School						
Email and Phone:	bweintraub@montecassino.org 918-746-4124						
Professional Event Organizer:	Brian Hoover						
Email and Phone:	brian@tatur.org 918-869-9808						
On-site Contact:	Joan Anderson	Mobile: <u>918-346-8585</u>					
Billing Contact:	Monte Cassino School	Phone: <u>918-746-4124</u>					
Billing Address:	2206 S Lewis AVE TULSA OK 74114						

### Event Timeline and Lane/Street Closure Information

Event Setup:	Date: <u>10/06/2022</u> Time: <u>8:00 am</u>						
Street Closure for Event Setup:	Date: <u>10/06/2022</u> Time: <u>8:00 am</u>						
Street(s) to be Closed for Event Setup:	Yorktown Ave between 21st St and 22nd Pl						
Event Start:	Date: <u>10/06/2022</u> Time: <u>8:30 am</u>						
Street Closure for Event Start:	Date: 10/06/2022 Time: 8:00 am						
Street(s) to be Closed for Event Start:	See Racecourse Map						
Run, Walk, Parade Start Time:	<u>8:30 am</u>						
Daily Event Hours: 8:30 to 10:30 AM							
Event End:	Date: <u>10/06/2022</u> Time: <u>10:30 AM</u>						
Street Reopens after Event End:	Date: <u>10/06/2022</u> Time: <u>11:00 AM</u>						
Event Teardown:	Date: <u>10/06/2022</u> Time: <u>10:30 AM</u>						
Street Reopens after Event Teardown:	Date: <u>10/06/2022</u> Time: <u>11:00 AM</u>						

## Secondary Permits Required

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

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

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

Security and/or Police: Contact, Email and Phone: <u>TPD Jacob Thompson (918) 527-0058</u> Medical and/or First Aid Services: Contact, Email and Phone: <u>Nurse on Staff</u> Traffic Control Barricade Company: Contact, Email and Phone: <u>NA</u> Equipment Setup: Date: <u>10/06/2022</u> Time: <u>8:00 AM</u> Equipment Pickup: Date: <u>10/06/2022</u> Time: <u>10:30 AM</u> Crowd Management Fencing Company: Contact, Email and Phone: <u>NA</u> Equipment Setup: Date: Time: Equipment Pickup: Date: Time: Parking Type: <u>Paved Lot</u> Transportation Service: <u>No service</u> Transportation Service: Contact, Email and Phone: <u>NA</u>

#### Sponsor and Other Event Information

Event Sponsor(s): Monte Cassino	
Name of Park and Location, if applicable: $\underline{N}$	<u>IA</u>
Drone: <u>No</u>	
Portable Toilets: Provider and Phone: NA	<u>\</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: 0	Number of Perform	Number of Performers/Bands: 0							
Performer/Band name and music type: <u>h</u>	<u>IA</u>								
Sound Amplification: No	Start Time:	Finish Time:	Finish Time:						
Please describe the sound equipment that	will be used for your event:								
NA									
Sound checks conducted prior to the even	t: <u>No</u> Start <sup>-</sup>	Time: Finish Time	э:						
Describe hot air balloons, fire lanterns or s	Describe hot air balloons, fire lanterns or similar devices used at event:								
NA									
Describe the use of any signs, banners, de	ecorations, or special lighting	used at event:							
Banner Signs									
Mitigation of Impact									
Please describe your plan for cleanup and event: Volunteers to help clean up after ra	, ,	, waste and garbage during	and after your						
Number of Trash Receptacles: <u>8</u>	Number of Dumpsters: <u>3</u>	Number of Recycling Cor	ntainers: <u>2</u>						
Cleanup Service Provider and Phone, if ap	oplicable: <u>Final Touch</u>								

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

Schools, Neighborhood Assn

#### 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 complwith all requirements of the City, County and State, and any other regulatory entity related to this Event. I agree to pa 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 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:	05/26/2022	Date routed:	09/21	/2022	Date for review	: 09/	28/2022		
Special Events	Committee Recon	nmendation:			□ Yes □	No		_	
Date routed to N	Mayor:		Mayor's	s Recomme	ndation:			Yes	No
Date routed to 0	Council:		Cit	ty Council A	pproval:			Yes	No
Date Permit Iss	ued:	Com	ments:	Form rev	vised 09/21/20	22.			

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