



# City of Tulsa

## SPECIAL EVENT PERMIT APPLICATION

### **Summary of Event**

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Name of Event: Annual Fall Bike Show Date(s) of Event: 10/20/2018  
Location Address: 4848 S PEORIA AVE E Council District(s): 9  
Event Description: Bike Show & Open House  
**Event Category:** Miscellaneous  
**Event Includes:** Tent/Canopy, Private Property  
Anticipated Attendance: Total: 500 Per Day: 500  
Anticipated Participants: Total: 500 Per Day: 500  
Number of Events for Monthly Event: NA

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

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Host Organization: Myers-Duren Harley-Davidson Website: www.tulsaharley.com  
Chief Officer of Host Organization: Johnny McClanahan  
Email and Phone: johnny@tulsaharley.com 918-743-4440  
Applicant Name: James McClanahan  
Email and Phone: james@tulsaharley.com 918-743-4440  
Professional Event Organizer: NA  
Email and Phone:  
On-site Contact: James McClanahan Mobile: 918-743-4440  
Billing Contact: Myers-Duren Harley-Davidson Phone: 918-743-4440  
Billing Address: 4848 S Peoria  
Tulsa OK 74105

## ***Event Timeline and Lane/Street Closure Information***

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**Event Setup:** Date: 10/20/2018 Time: 8 AM  
Street Closure for Event Setup: Date: Time:  
Street(s) to be Closed for Event Setup: NA

**Event Start:** Date: 10/20/2018 Time: 10 AM  
Street Closure for Event Start: Date: Time:  
Street(s) to be Closed for Event Start: NA  
Run, Walk, Parade Start Time: NA  
Daily Event Hours: Opens 10 AM  
Noon to 3 PM Live Music, Free Beer, Free Food & Free Drinks

**Event End:** Date: 10/20/2018 Time: 3 PM  
Street Reopens after Event End: Date: Time:

**Event Teardown:** Date: 10/20/2018 Time: 3 PM  
Street Reopens after Event Teardown: Date: Time:

## ***Secondary Permits Required***

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Beer Sales, Alcohol Sales: Free low point Beer  
Number of Food Vendors: 1  
Number of Food Trucks: 0  
Food Cooked on-site: No Fuel(s) to be used:  
Number of Item Vendors: 0 Number of Service Vendors: 0  
Number of Tents/Canopies: 3 10X20 Provider and Phone: Vendor Owned  
Number of Inflatables: 0 Provider and Phone: NA,  
Number of Amusement Rides: 0 Provider and Phone: NA  
Use of fireworks, rockets, lasers, or other pyrotechnics: No  
Provider and Phone: NA,

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

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Security and/or Police: Contact, Email and Phone: COBRA Executive Protection  
(918) 695-4471

Medical and/or First Aid Services: Contact, Email and Phone: NA

Traffic Control Barricade Company: Contact, Email and Phone: NA

Equipment Setup: Date:                      Time:                      Equipment Pickup: Date:                      Time:

Crowd Management Fencing Company: Contact, Email and Phone: NA

Equipment Setup: Date:                      Time:                      Equipment Pickup: Date:                      Time:

Parking Type: Parking Garage, ADA parking available

Transportation Service: No service

Transportation Service: Contact, Email and Phone: NA

**Sponsor and Other Event Information**

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Event Sponsor(s): Myers-Duren Harley-Davidson

Name of Park and Location, if applicable: NA

Drone: No

Portable Toilets:    Provider and Phone: NA

Total Number of Portable Toilets: 0                      Number of ADA Accessible Portable Toilets: 0

Equipment Setup: Date:                      Time:

Equipment Pickup: Date:                      Time:

Other information: NA

**Entertainment and Related Activities**

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Number of Stages: 0

Number of Performers/Bands: 1

Performer/Band name and music type: TBD (Rock Music)

Sound Amplification: Yes

Start Time: 12 PM

Finish Time: 3 PM

Please describe the sound equipment that will be used for your event:

Standard small band equipment

Sound checks conducted prior to the event: Yes

Start Time: 11:30 AM

Finish Time: 11:45 AM

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**

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Please describe your plan for cleanup and removal of recyclable goods, waste and garbage during and after your event: Cleanup Crew On-Site / Several Trash Receptacles placed around building & a dumpster located in the north parking lot.

Number of Trash Receptacles: 12

Number of Dumpsters: 1

Number of Recycling Containers: 0

Cleanup Service Provider and Phone, if applicable: NA

Equipment Setup: Date:

Time:

Equipment Pickup: Date:

Time:

Presented Event Concept to: No street closures

**Avidavit of Applicant**

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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

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**For City of Tulsa Special Events Committee Use Only**

Date received: 09.25.2018      Date routed: 10.02.2018      Date for review: 10.03.2018

Special Events Committee Recommendation: \_\_\_\_\_  Yes  No

Date routed to Mayor: \_\_\_\_\_      Mayor's Recommendation: \_\_\_\_\_  Yes  No

Date routed to Council: \_\_\_\_\_      City Council Approval: \_\_\_\_\_  Yes  No

Date Permit Issued: \_\_\_\_\_      Comments: Form revised and map attached 10.02.2018

