Permit #: SPEV-025520-2019 Application Date: 02/28/2019

Issue Date:



# City of Tulsa SPECIAL EVENT PERMIT APPLICATION

#### Summary of Event

Name of Event: Spring Kick-Off Party Date(s) of Event: 3/23/2019

Location Address: 4848 S PEORIA AVE E Council District(s): 9

Event Description: Open House Event

**Event Category**: Miscellaneous

Event Includes: Live Entertainment, Private Property

Anticipated Attendance: Total: 1000 Per Day: 1000
Anticipated Participants: Total: 1000 Per Day: 1000

Number of Events for Monthly Event: No

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

Host Organization: Myers-Duren Harley-Davidson Website: www.tulsaharley.com

Chief Officer of Host Organization: James McClanahan

Email and Phone: <u>james@tulsaharley.com\_918-743-4440</u>

Applicant Name: James McClanahan

Email and Phone: <u>james@tulsaharley.com\_918-743-4440</u>

Professional Event Organizer: NA

Email and Phone:

On-site Contact: <u>James McClanahan</u> Mobile: <u>918-743-4440</u>
Billing Contact: <u>Myers-Duren Harley-Davidson</u> Phone: <u>918-743-4440</u>

Billing Address: 4848 S Peoria

Tulsa OK 74105

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

**Event Setup:** Date: <u>03/23/2019</u> Time: <u>8:30 AM</u>

Street Closure for Event Setup: Date: Time:

Street(s) to be Closed for Event Setup: NA - Parking Lot

Event Start: Date: <u>03/23/2019</u> Time: <u>11:00 AM</u>

Street Closure for Event Start: Date: Time:

Street(s) to be Closed for Event Start: NA - Parking Lot

Run, Walk, Parade Start Time: NA

Daily Event Hours: Free Food & Free Drinks and Live Music from 12-4pm

**Event End:** Date: <u>03/23/2019</u> Time: <u>4:00 PM</u>

Street Reopens after Event End: Date: Time:

Event Teardown: Date: 03/23/2019 Time: 4:30 PM

Street Reopens after Event Teardown: Date: Time:

#### Secondary Permits Required

Beer Sales, Alcohol Sales: Not Applicable

Number of Food Vendors: 1

Number of Food Trucks: 0

Food Cooked on-site: No Fuel(s) to be used:

Number of Item Vendors:  $\underline{0}$  Number of Service Vendors:  $\underline{0}$ 

Number of Tents/Canopies: TBD Provider and Phone: <u>TBD</u>

Number of Inflatables: <u>0</u> 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: NA,

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

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: ADA parking available, Paved Lot

Transportation Service: No service

Transportation Service: Contact, Email and Phone: NA

#### Sponsor and Other Event Information

Event Sponsor(s): <u>Myers-Duren Harley-Davidson</u>

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 Number of Stages: 1

Number of Stages: 1	Number of Performers/Bands: 1			
Performer/Band name and music type:	Usual Suspect/Classi	c Rock		
Sound Amplification: Yes	Start Time	e: <u>12:00 PM</u>	Finish Time:	4:00 PM
Please describe the sound equipment the	nat will be used for you	event:		
<u>TBD</u>				
Sound checks conducted prior to the ev	ent: <u>Yes</u>	Start Time:	11:30 AN Finish Tir	me: <u>11:40 AM</u>
Describe hot air balloons, fire lanterns o	r similar devices used a	at event:		
<u>NA</u>				
Describe the use of any signs, banners,	decorations, or specia	lighting used a	t event:	
<u>NA</u>				
Mitigation of Impact				
Mitigation of Impact				
Please describe your plan for cleanup a event: Cleanup Crew On-Site / Several				
Number of Trash Receptacles: 12	Number of Dumpster	s: <u>1</u> Num	ber of Recycling C	ontainers: <u>0</u>
Cleanup Service Provider and Phone, if	applicable: NA			
Equipment Setup: Date:	Time: Ec	uipment Pickup	o: Date:	Time:
Presented Event Concept to: No Street	Closures			
Avidavit of Applicant				
I certify that the information contained in That I have read, understand, and agree comply with all requirements of the City, agree to pay and be financially responsi the Event. I further agree to indemnify a agents, representatives, from any claims activities related to the Event. I understate of the end of the civil claims of third parties that are	e to abide by the rules a County and State, and ble for any costs and fond hold harmless the Cost (including cost of defe	and regulations any other regules that may be ity of Tulsa, and and the ity of Tulsa, and the ity of Excuse my foot excusion excuse my foot excuse my foot excuse my foot excuse my foot e	governing this Ever latory entity related incurred by the Cit dil City of Tulsa of ms) or damages the failure to comply wit	nt. I agree to to this Event. I y of Tulsa due to fficers, employees at may arise from h orders of law
Initials: On File				

#### For City of Tulsa Special Events Committee Use Only Date received: 02.28.2019 Date routed: 03.05.2019 Date for review: 03.13.2019 ☐ Yes ☐ No Special Events Committee Recommendation: ☐ Yes ☐ No Date routed to Mayor: Mayor's Recommendation: Date routed to Council: ☐ Yes ☐ No City Council Approval: Form revised and map attached 03.05.2019. Date Permit Issued: \_\_\_\_\_ Comments:

