



The City of  
**OKLAHOMA CITY**

## SPECIAL EVENTS PERMIT

Page 1

Current Date 3/10/25

Applications are processed in the order received - preference given to long standing events.

Event Name OKCFMD Springfest

Expected Attendance 1000

Event Coordinator Frances Smith

Email Address francesmith.okcfmd@gmail.com

Mailing Address 311 S. Klein Ave, Okc, OK 73108

Phone 405-822-9552 Fax \_\_\_\_\_

Event Address (Location) 1225 SW 2nd Street, Okc, OK 73108

Event Start Day/Date 4/5/25 Event Start Time 12:00pm

Event End Day/Date 4/5/25 Event End Time 5:00pm

Set-up Day/Date 4/5/25 Start Time 7:00am End Time 11:30am

Tear-down Day/Date 4/5/25 Start Time 5:00pm End Time 7:00pm

### Street Closure Times (if applicable)

Closure Day/Date 4/5/25 Time 7:00am

Reopening Day/Date 4/5/25 Time 7:00pm

### Event description (activities, exact location, etc.). Please also submit an event site map.

A festival celebrating the history & future of the OKC Farmers Market District, highlighting Spring.

This fest will feature live music, food trucks, local artists, & artisans.

We will be highlighting district restaurants & shops (including our farmers market).

Since we are featuring spring, related kids activities & education will be provided.

Located between Klein & Ellison, Reno to S. 3rd Street.

Is this an annual event? yes If yes, how many years? 1st

How many vendors will sell items at your event (retail, food, beverages, etc.)?

☐ None ☐ 1 ☐ 2-10 ☐ 11-25 ☐ 26-50 ☒ 50+

Please note: the deadline for the food [vendor list](#) is a strict **10 business days** prior to the event.



**Event includes (mark all that apply):**

- |   |  |  |
|---|--|--|
| <input checked="" type="checkbox"/> Block party       | <input checked="" type="checkbox"/> Street closure                 | <input type="checkbox"/> Assembly event <small>(First Amendment)</small> |
| <input checked="" type="checkbox"/> Beverage sales    | <input type="checkbox"/> Procession/Horse Procession               | <input type="checkbox"/> Residential area                                |
| <input checked="" type="checkbox"/> Alcohol sales     | <input type="checkbox"/> Parade                                    | <input checked="" type="checkbox"/> Non-residential area                 |
| <input checked="" type="checkbox"/> Food sales        | <input checked="" type="checkbox"/> Amplified sound                | <input type="checkbox"/> Parklet   |
| <input checked="" type="checkbox"/> Merchandise sales | <input checked="" type="checkbox"/> Live entertainment             | <input type="checkbox"/> Athletic event                                  |
| <input checked="" type="checkbox"/> Street activities | <input checked="" type="checkbox"/> Electrical wiring/generator(s) | <input type="checkbox"/> Filming   |

Number of tents 100

Size of tent(s) 10x10

Number of Parade Entries \_\_\_\_\_ Number of Horses/Animals participating \_\_\_\_\_

**Emergency primary contacts during event:**

Name <u>William McAnally</u>	Name <u>Frances Smith</u>
Mobile <u>405-492-0361</u>	Mobile <u>405-822-9552</u>
Email <u>william@okcfarmersmarket.com</u>	Email <u>francesmith.okcfmd@gmail.com</u>

**Event Coordinator Signature**

Frances Smith

*(By signing this permit, the event coordinator and their organizing partners agree to abide by the applicable general rules of application listed and the applicable laws referenced under City of Oklahoma City Municipal Code Chapters 50 and 60)*

**RETURN COMPLETED FORM**

Via U.S. Postal Special Events - Public Information & Marketing 200 N. Walker, OKC, OK 73102

Via E-Mail [specialevents@okc.gov](mailto:specialevents@okc.gov) (preferred method)

Via Fax (405) 297-3124

**Questions? Call Special Events Permit Office (405)297-2890**

**SPECIAL EVENTS OFFICE USE**

Staff comments:

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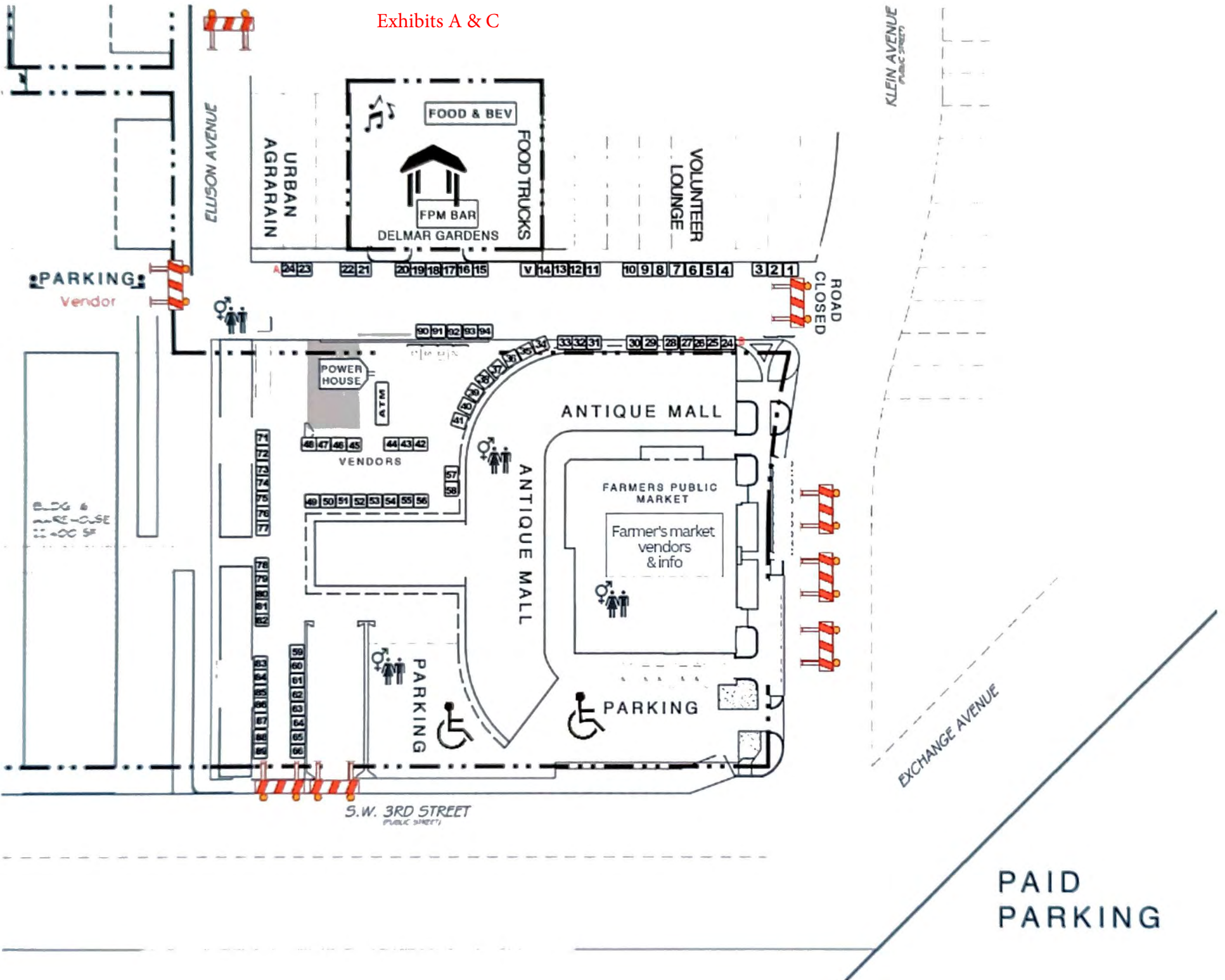


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**Special Events Office Approval** \_\_\_\_\_



Exhibits A & C











The City of  
**OKLAHOMA CITY**

## SPECIAL EVENTS

Consent Affidavit confirms that you have received street closure approvals from property owners for the street closure. Signed petition form, emails or letters are accepted forms of consent.

### AFFIDAVIT OF CONSENT FROM, AND NOTICE TO, PROPERTIES ABUTTING EVENT

## AFFIDAVIT

STATE OF OKLAHOMA)

COUNTY OF OKLAHOMA)

Know all men by these presents: I,

Jody McAnally

Name

as event coordinator of the

OKC FMD Springfest

Event Name

hereby certify that all required property owners abutting the street closure for the named event **have**  
been notified in writing and have provided consent that the right-of-way be closed 4/5/25

date(s)

[Signature]  
Signature

3/13/25  
Date



Subscribed and sworn before me this 13 day of March, 2025.

Frances Elizabeth Smith

Notary Public

My Commission expires 8/19/2028

Find additional info and forms @ [www.okc.gov/specialevents](http://www.okc.gov/specialevents)



Approvals for street closures can be received either by signing this petition or via letters or e-mails.

**STREET CLOSURE PETITION**

**EXAMPLE:**

Agree	Disagree	Signature of property owner or lessee	Street address & business name (if applicable)
x		<i>John Smith</i>	1234 Street Name, OKC
x		Mary Joseph	letter attached 3456 Street Name, OKC
x		Jane Doe	e-mail attached - 91011 Street Name, OKC
x		<i>Peter Paul</i>	Pizza Palace - 5678 Street Name, OKC

Contact Name Frances Smith  
 Contact E-mail frances.smith.okc@ndc.com Phone 405 822 9552  
 Street(s) will be closed on DATE:(mm.dd.yy) 4/5/25 TIME 7:00am  
 Street(s) will re-open on DATE:(mm.dd.yy) 4/5/25 TIME 7:00pm  
 Street closure is from what street to what street? S. 2nd Str. from Klein to Ellison  
& Ellison from Reno to S. 2nd

We, the undersigned, have been notified of street closures associated with the event noted and agree or disagree with the closure. I understand that if I have concerns about the proposed closure, I can contact the event organizer or contact Oklahoma City's Special Events Office at (405) 297-2890

Agree	Disagree	Signature of property owner or lessee	Street address & business name (if applicable)
X		<i>M. Smith</i>	211 S. Ellison (Pam's)
X		<i>[Signature]</i>	1228 SW 2nd (Parent House)
X		<i>George</i>	311 S. Klein (Pinafles)
X		<i>A. R. Bas</i>	1211 S. 2nd (The Loaded Bowl)
X		<i>Cassie Mann</i>	1235 SW 2nd (Urban Ag.)
X		<i>Wendy Hest Furen</i>	1205 SW 2nd (VOX)
X		<i>John [Signature]</i>	1203 SW 2nd (Palo Santo)
X		<i>[Signature]</i>	311 South Klein (Antique Wall)
X		<i>John [Signature]</i>	210 Ellison (BYOKC)





## Springfest Apr. 5th official street closure notification, urgent!

1 message

OKC Farmer's Market District Events <okcfmdevents@gmail.com>

Wed, Mar 12, 2025 at 6:32 PM

To: Brian Palo Santo <Brian@palosantobar.com>, Bailey Palo Santo <bailey@palosantobar.com>, Matthew Burch <matt@urbanagrarian.com>, Chelsey Simpson <Chelsey@urbanagrarian.com>, Noah <bikramyogaokc@hotmail.com>, Hannah Powerhouse <hannahclark2796@gmail.com>, Clay Berkes Powerhouse <clayberkes@gmail.com>, Jody McAnally <jody@okcfarmersmarket.com>, Jeff Vox <jeff@voxaudiovisual.com>, Lindsay Davidson <lindsay@voxaudiovisual.com>, Kaitlyn <theloadedbowltruck@gmail.com>, The Loaded Bowl OKC <theloadedbowlkc@gmail.com>  
Cc: William McAnally <William@okcfarmersmarket.com>

Hey everyone. We're thrilled about the next district festival - OKCFMD SPRINGFEST!!

This is an official notification that we will be closing down 2nd Street from Klein to Ellison & Ellison from Reno to 2nd on April 5th, 2025 from 7am-7pm.

We have to turn in our city Street closure petition tomorrow!

Please authorize your staff tomorrow (dayshift) to sign.

If that is not possible, please set up a time to meetup Thursday no later than 3pm.

If that is not possible, please respond to this email stating you understand & agree with the street closure. Please include the following petition details in your response:

"We, the undersigned, have been notified of street closures associated with the event noted and agree or disagree with the closure. I understand that if I have concerns about the proposed closure, I can contact the event organizer or contact Oklahoma City's Special Events office at 405-297-2890."

Then check/indicate whether you agree or disagree.

Please sign with your name, business name, & business address

Other info on petition includes (for your records):

Contact Name: Frances Smith

Contact email: frances.smith.okcfmd@gmail.com

Streets will be closed on

Date: 04/05/25 Time: 7am

Streets will re-open on

Date: 04/05/25 Time: 7pm

Street closure is from what street to what street: 2nd Street from Klein to Ellison & Ellison from Reno to 2nd.

(attaching the petition in PDF below)

Thanks everyone,

Frances Smith

OKC Farmer's Market District Manager

4058229552





# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/05/2025

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> East Main Street Insurance Services, Inc. Will Maddux PO Box 1298 Grass Valley CA 95945	<b>CONTACT NAME:</b> Will Maddux <b>PHONE (A/C, No, Ext):</b> (530) 477-6521 <b>E-MAIL ADDRESS:</b> info@theeventhelper.com <b>FAX (A/C, No):</b>
<b>INSURED</b> FMD Association c/o William McAnally 311 S Klein Ave Oklahoma City OK 73108	<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Evanston Insurance Company <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>
	<b>NAIC #</b> 35378

**COVERAGES****CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Host Liquor Liability <input type="checkbox"/> Retail Liquor Liability GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC OTHER:	Y	N	3DS5476-M3143752	04/05/2025 12:01 AM	04/06/2025 12:01 AM	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (other than fire) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 Deductible \$ 1,000
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below Y/N <input type="checkbox"/> N/A						PER STATUTE <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder listed below is named as additional insured per attached MEGL 2217 01 19. Attendance: 1000, Event Type: Festival & Cultural Event - Indoor and/or Outdoor.

**CERTIFICATE HOLDER****CANCELLATION**

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

City of Oklahoma City and Its Trusts  
200 N Walker Ave  
Oklahoma City

OK 73102

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