



## PHOTOGRAPHY/FILMING PERMIT APPLICATION

Name of Applicant: (Company, Organization, Individual) \_\_\_\_\_ Date: \_\_\_\_\_

Project Manager: \_\_\_\_\_

Address: \_\_\_\_\_ Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Work: \_\_\_\_\_ Cell: \_\_\_\_\_ Fax: \_\_\_\_\_

Location Manager: \_\_\_\_\_ Phone: \_\_\_\_\_

Other Contact: \_\_\_\_\_ Phone: \_\_\_\_\_

Production Type:  Still Photography  TV Commercial  TV Movie  TV Episodic  Feature Film  Music Video  
 Corporate Video  Other \_\_\_\_\_

Total Personnel: \_\_\_\_\_

**EQUIPMENT DETAIL:** (Provide the exact number of each to be used at filming location(s).)

Generators: \_\_\_\_\_ Cars: \_\_\_\_\_ Trucks: \_\_\_\_\_ RV's: \_\_\_\_\_ Other: \_\_\_\_\_

**INSURANCE:**

An insurance certificate must be submitted. Requirements are: 1) Minimum \$2,000,000 General Liability Limit 2) Proof of Worker's Compensation. 3) City of Indio named as an additional insured. 4) \$10,000,000 Aircraft Liability (when applicable).

**LOCATION SHOOT:** (Please provide property owner(s), address(es), approval & nearest cross street of filming location(s))

Date:	Time:	Location and Activity:	Prep/Film/Strike:
		Property Owner's Signature of Approval:	

**ENCROACHMENT:**

Will this activity encroach onto the public street/sidewalk?  Yes  No If yes, an encroachment permit will be required from Engineering Services.

**TRAFFIC:**

If filming is planned on City street(s) please submit a site plan showing location(s) of cast, crew, vehicle(s) and the route to be traveled.

Describe Traffic Control Plan (i.e. personnel and devices to direct traffic): \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

COMMUNITY SERVICES DEPARTMENT  
 100 Civic Center Mall • Indio, CA 92201  
 (760) 391-4175 • Fax (760) 391-6452

**STUNTS/SPECIAL EFFECTS:**

Detail Explanation of Stunts or Special Effects: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PYROTECHNICS:**

Will you use pyrotechnics?  Yes  No (Fire Department Permit may be required)  
If yes, please provide Pyro technician's Name and License Number:

**HAZARDOUS MATERIALS/FLAMMABLES:**

Will gasoline, diesel, propane, compressed gases, explosives or other hazardous materials be stored, handled and/or used on-site?  Yes  No (Fire Department Permit may be required)  
If yes, please provide a list of all hazardous materials and flammables to be used:

**AERIAL STUNTS/ELEMENTS:**

Please provide a detailed explanation of any aerial stunts, helicopter landings, hot-air balloons, etc. which will be used:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

The undersigned hereby applies for a Photography/Film permit in consideration of the granting of this permit, hereby agrees at no cost to the City to hold harmless and defend, indemnify, and forever release the City, its officers, agents, volunteers, employees and representatives from and against any and all claims, demands, liability, damage, loss, cost and expense of any kind or nature, from any source, including but not limited to cost and attorney's fees which the City may and at any time sustain or incur by reason or in consequence of the granting of this permit. In addition the applicant agrees to prevent damage to the grounds, building, fixtures, equipment and any other City property. By signing below the applicant hereby acknowledges they have read, understand and agree to abide by any conditions issued by the Community Services Department and all other City Agencies including but not limited to the City of Indio Code of Ordinances.

\_\_\_\_\_  
SIGNATURE OF APPLICANT

\_\_\_\_\_  
DATE

**FOR OFFICE USE ONLY:**

Application Fee: \$ \_\_\_\_\_ Location Fee: \$ \_\_\_\_\_ Total Fee Due: \$ \_\_\_\_\_

Per Resolution No. 5953:

Still Photography Fee: Application Fee \$50.00  
Location Fee \$10.00/per day or \$50.00/per 7 day week

Film/Video Production: Application Fee \$100.00  
Location Fee \$10.00/per day or \$125.00/per 7 day week

- |   |   |
|---|---|
| <input type="checkbox"/> No Special Approvals/Permit Required | <input type="checkbox"/> Encroachment Permit      |
| <input type="checkbox"/> FAA Approval                         | <input type="checkbox"/> Fire Department Approval |
| <input type="checkbox"/> PM-10 Permit                         | <input type="checkbox"/> Property Owner           |
| <input type="checkbox"/> Police Department Approval           | <input type="checkbox"/> Homeowner Association    |

Date Received: \_\_\_\_\_ Total Fees Paid: \$ \_\_\_\_\_ Check #: \_\_\_\_\_ Cash: \$ \_\_\_\_\_

Permit Approved/Denied by: \_\_\_\_\_