FILMING PERMIT APPLICATION GUIDELINES



- 1. Please fill out the filming permit application form. Attach a detailed description of the project if needed.
- 2. Please submit your certificate of insurance at the same time as the permit application.
- 3. Noticing of neighboring residences and businesses is required unless applicant can show that it is not applicable. Notices should be distributed 48 hours before any filming activity is to take place. Notices should include the location, dates and times of all anticipated filming activities, including anticipated set-up and break-down times. Notices should include a contact number for the filming applicant. The City's contact number (510-528-5710) should also be included on the notice.
- 4. If filming will be in or near a City Park, filming times must be within the regular open hours of the park, unless a specific request for additional times is requested and granted by the Recreation and Community Services Director. Depending upon the request, a signature survey of adjacent neighbors may be requested in this situation.
- 5. Film permit fees are \$385.50 per day (Fiscal Year 2017-18), plus any city cost and the fee for an encroachment permit that may be required if the filming impacts the public right-of-way (sidewalks, parking, etc.). Fees are in the City's Master Fee Schedule, which may be found online at www.albanyca.org. Student films and non-profit films may request a waiver of fees.

Contact Information:

Anne Hsu Interim City Clerk City of Albany 1000 San Pablo Avenue Albany, CA 94706

Email: ahsu@albanyca.org

TEL: (510)528-5763

Thanks for filming in Albany!

City of Albany

FILMING PERMIT APPLICATION 1000 San Pablo Avenue - Albany, CA 94706

| Application Date: | Project Name: |
|--------------------|--|
| Film Company or I | Individual Applying |
| Type of project: _ | (student project, training, non-profit, commercial film, etc.) |
| | (student project, training, non-profit, commercial film, etc.) |
| Contact Person | |
| Daytime & Evenin | g Telephone Numbers |
| Company Mailing | Address |
| Email Address | |
| Filming Location(s | Requested |
| | |
| | |
| Date(s) Requested | d |
| Times: From _ | To |
| Approximate Num | ber of Participants |
| Number/Type of \ | /ehicles |
| | |
| Describe your pro | ject, attach a separate page with project details, if needed: |
| | |
| | |
| | |
| | |
| | |

| | Project | name | |
|---|---------|------|--|
| Hee of Dublic Dight of Man 2 | Voc | No | |
| Use of Public Right-of-Way? | Yes | No | |
| Will Traffic Control be Needed? | Yes | No | |
| Use of Street Barriers Requested? | Yes | No | |
| Use of Pyrotechnics or any type of Weapons? | Yes | No | |
| Delivery of Barriers Requested? | Yes | No | |
| If you check yes to any of the above questions, p Additional fees may apply pursuant to the curre | | - | |
| It is understood and agreed that any special conditions must be complied with. Group Insurance must be obtained with a single limit coverage applying to Bodily and Personal Injury and Liability Damage in the amount of \$1,000,000. The City shall be named as an additional insured on the policy. Film permit fees are pursuant to the current Master Fee Schedule. Film Company Representative Signature Date | | | |
| | | | |
| | | | |

Title/Position

DEPARTMENTAL APPROVALS

| FIRE COMMENTS: | | |
|---|--|--|
| | | |
| Recommend: Approval Denial . | | |
| | | |
| POLICE COMMENTS: | | |
| | | |
| | | |
| Recommend: Approval Denial . | | |
| | | |
| COMMUNITY DEVELOPMENT & ENVIRONMENTAL RESOURCES COMMENTS: | | |
| | | |
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| Bassana and Annual Dariel D | | |
| Recommend: Approval Denial . | | |
| | | |
| RECREATION & COMMUNITY SERVICES COMMENTS: (Required if City Parks will be used) | | |
| | | |
| | | |
| | | |
| Approved (if required) Yes No . | | |
| Approved (if required) Yes No . | | |
| | | |
| Approved (if required) Yes No . PUBLIC WORKS COMMENTS: | | |
| | | |
| | | |
| PUBLIC WORKS COMMENTS: | | |

| Project Name | |
|--------------|--|
| | |

| CITY MANAGER'S OFFICE: | | |
|---|--|--|
| Group Insurance must be obtained with a single limit coverage applying to Bodily and Personal Injury and Liability Damage in the amount of \$1,000,000. The City shall be named as an additional insured on the policy. | | |
| IS PROOF OF INSURANCE ATTACHED? Yes No . | | |
| Have appropriate Department Heads given their approval? Yes No . | | |
| CHECK THAT FEES HAVE BEEN PAID? Yes | | |
| APPLICATION IS: Approved Denied. | | |
| Approval Signature Date | | |