CITY OF PIEDMONT FILMING PERMIT

Welcome to Piedmont! The City of Piedmont has a permitting process for filming. Our process is modeled after the suggested format of the California Film Commission. Attached are the guidelines for filming as well as all applications necessary to apply for a permit.

The City of Piedmont would like to help in any way we can to accommodate your filming needs, but ask that you keep in mind that the City of Piedmont is primarily a residential community. To ensure that our residents are given adequate notice of filming activity, there is a ten-day notification period associated with the request for a permit. *Applications must be submitted at least 5 business days in advance of the desired date of neighbor notification*.

The filming coordinator for the City of Piedmont can be reached by telephone at (510) 420-3050 or by mail at 120 Vista Avenue, Piedmont, CA 94611. Please do not hesitate to call if you have any questions regarding the filming permit process or the community.

Thank you for selecting our community. We look forward to working with you!

FILMING PERMIT CHECKLIST

Listed below are the items that must be submitted in order to obtain a Filming Permit

- Filming Permit Application and Fee (\$1,733 still photography; \$2,110 commercial video; \$2,624 motion picture video) (includes \$28 records management fee)
- _____ City of Piedmont Business License Tax (\$500 per day + \$4 State Disability Access Programs Fee)
- ____ Copy of Insurance

____ Indemnification Agreement

- _____ Completed Neighborhood Notification Form and Affidavit of Service (Please note: There is a ten-day notice period associated with filming permits)
- _____ Special Use of Street Permit
- _____ Parking Plan

CITY OF PIEDMONT FILMING PERMIT

Department of P			Phone: 510-420-3050	
120 Vista Avenue Piedmont, CA 94			Fax: 510-658-3167	
Filming Location	on			
Filming Date(s)			_
Alternate Film	ing Date(s)			-
Hours (time of	arrival at site through de	parture)		
Activities				
Approximate N	Jumber of Participants (ca	ast and crew)		
Please Indicate	the Type and Number of	f Vehicles and Other Equ	lipment	
Number	Type of Vehicle	Approx. Length of Vehicle (ft)	(Y/N)	
Request for Sp	ecial Assistance			
	Control			
□ Street (□ Emerge	Closure ency Services			
Please indicate	any other special assistan	ce you may need		

APPLICANT DATA

Applicant						
Business Name						
Address						
Mailing Address (if different from above)						
	hone Number Fax Number					
Location Manager						
Please indicate the name of the person in charge of employees' conduct:	of the location and responsible for applicant's and applicant's					
Name						
Address						
Telephone Number	Fax Number					
Emergency Notification						
Please indicate at least two persons to be contact conditions of the film permit	ed in the event of emergency situations which might alter the					
Name						
*Address						
24-hour phone number	Fax Number					
*At least one contact person must be located with						
Name						
Address						
24-hour phone number	Fax Number					
APPLICANT SIGNATURE						
Signature of Applicant/ *Principal Officer	Date					
Principal Officer	Date					

* If the applicant is a corporation, the application shall be signed by the two principal officers of the corporation.

PROPERTY OWNER

Please complete if the proposed filming or taping involves the use of private property

Name of Property Owner Property Owner's Address (if different from abo	
	Fax Number
I grant permission to	to use my property
located at or other activities as indicated on this permit.	, Piedmont, California for the purpose of filming

Signature of Property Owner

Date

 \Box The proposed filming or videotaping for motion picture or television production is conducted by a nonprofit organization which qualifies under Section 501(c)(3) of the Internal Revenue Code or Section 23701 of the California Revenue and Taxation Code as a charitable organization, and no person, directly or indirectly, receives a profit from the marketing or production of the film or tape or from showing the film, tapes or photos.

Please attach reasonable proof thereof.

SIGNATURE OF APPLICANT

DATE

This agreement is made and entered into as of this_____ day of _____, 20__, by and between the CITY OF PIEDMONT, (hereinafter referred to as ACITY@) and ______

_____ (hereinafter referred to as AAPPLICANT@) in connection with the application by Applicant to City for the issuance of a filming permit.

As a condition to the issuance of such filming permit by City, Applicant agrees to defend, indemnify and hold the City harmless from and against any and all losses, liability, claims, action, causes of action, suits, judgments, settlements, costs or expenses (including but not limited to attorney fees as approved by a court, and responsible investigative, discovery, and court costs,) involving injuries to or death of any person, including injury to Applicant's employees or damage to property, including but not limited to any property of permittee or City occurring on or about the filming area, and all claims which arise from or are connected with the negligent performance of or failure to perform work or other obligations of this agreement, or are caused by the negligent acts of the City, its Council Members, officers, agents, or employees, except such injury, death or damage as is caused by or arises out of or is in any way connected with the following: City's sole negligence or willful misconduct, but not from City=s mere comparative or contributory negligence; and all expenses of investigating and defending against same.

Signature

Date

NOTICE OF INTENT FOR FILMING

The purpose of this form is to notify adjacent property owners of an application for a filming permit in the City of Piedmont.

Company:			
Contact Person:			
Telephone No.:			
Filming Location:			
Proposed Dates:			
Proposed Hours:			
(includes arrival through d	eparture)		
Description of Proposed A	ctivities:		
Date of This Notice:			
		or mailed by	
sigi	ature		signature

This notice will *not* be followed by a notice from the City. If you have any questions regarding the permit or this notice, please contact the City of Piedmont at 510-420-3050 between the hours of 8:30 am to noon and 1:00 pm to 5:00 pm, Monday through Friday, or by mail at Department of Public Works, City of Piedmont, 120 Vista Avenue, Piedmont CA 94611.

<u>For Staff Use Only</u> <u>Department Recommendations</u>

Fire Department:

Public Works Department:

Police Department:

Finance Department:

Cost for overtime personnel: _____

Filming Location

Date(s) of Filming

For Staff Use Only

ACTION OF THE CITY ADMINISTRATOR

APPLICATION IS HEREBY:

_____APPROVED _____APPROVED WITH CONDITIONS NOTED _____DENIED

SPECIAL CONDITIONS:

City Administrator

Date

Filming Location

Date(s) of Filming