



City of Coral Gables Community Recreation FILM AND PHOTOGRAPHY PERMIT

PERMIT #:

Today's date: _____

1. Legal name of the permit applicant (company or individual): _____
2. Contact Person for this permit application: _____ Phone: _____ Email: _____
3. Permit applicant address: _____ City _____ State _____ Zip _____
4. Permit applicant phone: _____ Permit applicant email: _____
5. Is the Contact Person an officer of the legal entity? Yes No If yes, attach verification from sunbiz.org. If no, go to next question.
6. Is the contact person an authorized agent of the applicant? Yes No If Yes, Contact Person (authorized agent) must provide the city with a limited power of attorney evidencing that they are authorized to execute legally binding contracts on behalf of the permit applicant. If No, then this agreement must be executed (signed) by an officer or authorized agent of the legal entity.
7. Client: _____
8. Please provide a map or picture of location site for clear identification.
Location 1 (Name and address): _____
 Film dates: _____ No. of days: _____ Hours: Start _____ End _____
Location 2 (Name and address): _____
 Film dates: _____ No. of days: _____ Hours: Start _____ End _____
Location 3 (Name and address): _____
 Film dates: _____ No. of days: _____ Hours: Start _____ End _____
9. Production type: Still Motion Picture/Video Film Major motion picture
10. Classification: Commercial Industrial TV Multimedia Documentary Feature Residential
 Student project Other _____
11. Total personnel: _____ Est. expenditures: \$ _____
12. Total vehicles/equip: _____
 Generators Cars Trucks Catering vehicle Vans Other
13. Insurance carrier: _____
 Description: _____
14. Parking requirements: _____
15. Special Effects: Yes No; If so, please list all that apply _____

INDEMNIFICATION:

For and in consideration of the City of Coral Gables consent to allow the Applicant to conduct any type of filming and/or photography operations, productions and/or shoots within the limits of the City of Coral Gables, the Applicant agrees as follows:

The Permit Applicant jointly and severally, hereby hold harmless, indemnify and defend the City of Coral Gables, its representatives, officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions on the part of the Permit Applicant or any of the participants of the Event outlined in this application. This indemnification provision shall survive the termination of this contract and shall be in full force and effect beyond the term or termination of this contract, however, terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under section 440.11, Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the City may have under the doctrine of sovereign immunity of section §768.28, Florida Statutes.

Permittee agrees to all the terms and conditions of this permit, including provisions on the reverse side of this form and any attachments; agrees to obtain prior City approval for deviations from the information provided herein; and understands that failure to comply with these requirements may result in the immediate cancellation of production.

Weather Note: Renewable without fee, if weather conditions are unfavorable for shooting.

Applicant/Title _____ Date _____

NOTES:

OFFICE USE ONLY

Date received: _____ Date Permitted: _____

Parking meter numbers: # _____ # _____ # _____

Have business owners and/or residence been notified? Yes No Shot in the City of Coral Gables? Yes No

Reviewed by: Police Fire Traffic-Engineering Maint. Services Risk Management Film Liaison

PHOTO FEES: \$ _____

001-329-830

APPROVED

DATE

TOTAL FEES: \$

Type of permit:

- A. Public property-still photography
- B. Public property- motion picture/video
- C. Residential- large still/commercial/video
- D. Residential- major motion picture

APPLICATION COMPLETION CHECKLIST:

- Film and Photography Permit
- Certificate of Insurance (COI)
- Site Diagram (Showing Film and Parking Areas)
- HOA Approval
- Homeowners Approval
- Neighborhood Notification Letter
- Neighborhood (Hours: Start) Approval

