

FILM PERMIT APPLICATION

Production Company Information							
Name:							
Address:							
City, Province:		Postal Code:					
Phone:	Fax:	Email:					
Production Company Contacts							
Location Manager:	Cell:	Email:					
Assistant Location Manager:	Cell:	Email:					
Production Manager / On site contact:	Cell:	mail:					
Post Production Accountant:	Cell:	Email:					
Parent Company Information							
Name:							
Address:							
City, Province:	Postal Code:						
Phone:	Fax:	Email:					
	Production Information	1					
Production Title:							
Location #1 - outline of proposed filming activity:							
Scene Details including street / sidewalk use in an aerial photo:							
Parking / Street Requirements – provide a parking plan in an aerial photo							
On-Street Parking	City Parking Lot	Street Closure					
Prep Date(s):	Start Time:	End Time:					
Shoot Date(s):	Start Time:	End Time:					
Wrap Date(s):	Start Time:	End Time:					
Number of Essential Work Trucks:	Number of Crew Members:	Number of Cast:					

Location #2 - outline of proposed filming activity:

Scene Details including street & sidewalk use in an aerial photo:

Parking / Street Requirements – provide a parking plan use in an aerial photo							
	City Parking Lot:			Street Closure:			
	Start Time:		End Time:				
	Start Time:			End Time:			
	Start Time:			End Time:			
al Work Trucks:	Number of Crew Members:		Number of Cast:				
kposed Weapons		Vehicle Stunt		Stur	nt		Helicopter
incl. Simulated)		Vehicle Tow Shots		Wet	downs		Animals
c Smoke		Vehicle Drive up/away		Rair	ו		Ext. Set Construction
		Vehicle Drive by		Sno	W		Other
	arking / Street Req	City Sta Sta ial Work Trucks: Nui kposed Weapons incl. Simulated)	City Parking Lot: Start Time: Start Time: Start Time: Start Time: Start Time: Start Time: Start Time: Number of Crew Members: kposed Weapons □ Vehicle Stunt incl. Simulated) □ Vehicle Tow Shots Compared Start Start Start Time: Start Time:	City Parking Lot: City Parking Lot: Start Time: Start Time: Start Time: Start Time: Start Time: Start Time: Number of Crew Members: Kposed Weapons Vehicle Stunt I incl. Simulated) Vehicle Tow Shots I Compared Start I Start Time: Start Start Star	City Parking Lot: Start Time: Start Time:	City Parking Lot: Street C Start Time: End Tim ial Work Trucks: Number of Crew Members: Number kposed Weapons Vehicle Stunt Stunt incl. Simulated) Vehicle Tow Shots Wetdowns ic Smoke Vehicle Drive up/away Rain	City Parking Lot: Street Closure Start Time: End Time: ial Work Trucks: Number of Crew Members: Number of Ca kposed Weapons Vehicle Stunt Stunt Image: Stunt incl. Simulated) Vehicle Tow Shots Wetdowns Image: Stunt ic Smoke Vehicle Drive up/away Rain Image: Stunt

Location of Circus parking.	
Request for pyrotechnic activities approval meeting?	See Film Permit Guidelines

INDEMNITY:

Logation of Circus parking

The applicant will, if approval is granted for the services or facilities requested in the application, indemnify and save harmless the City from and against any and all claims for bodily injury or property damage caused by, arising from or connected with any act or omission of the applicant or any agent, employee, customer, licensee or invitee of the applicant, and against and from all liabilities, expenses, reasonable costs and outside legal or other fees incurred in respect of any claims or any actions or proceedings brought thereon arising directly or indirectly from or in connection with the property, facilities or services of the City related to the operations of the applicant.

INSURANCE REQUIREMENTS:

If the application is approved, the applicant will be required to obtain and keep in force throughout the period of use permitted under this application in the name of the applicant with the City listed as an additional insured as their interests may appear comprehensive general liability insurance against claims for personal injury, death or property damage occurring upon or in or about the licensed area in an amount not less than \$5,000,000.00 per accident or occurrence and otherwise with an insurer and deductible and on terms satisfactory to the City. The applicant, on demand by the City, will deliver to the City forthwith from time to time the Certificate of Insurance giving evidence of such coverage.

COVID-19:

The applicant has a Covid-19 Safety Plan in place that meets WorkSafe BC Health & Safety Protocols and Public Health Officer COVID-19 Orders, Notices & Guidance for Motion Picture and Television productions. The signatory certifies they have the authority to sign on the Production Companies behalf.

CREDITS TO THE CITY OF LANGLEY:

The applicant will give credit to the City of Langley in the production.

Agreed to and accepted by:

AUTHORIZED SIGNATORY OF APPLICANT – SIGN & PRINT NAME Da	ate: