

APPLICATION FOR FILM, PHOTOGRAPHY AND VIDEO PERMIT

COMPANY INFORMATION

NAME				
PRODUCER/DIRECTOR				
ADDRESS				
CITY, STATE, ZIP				
COMPANY PHONE	MOBILE/HOME		OFFICE	
EMAIL				

IS APPLICANT A 501(C)(3)? YES NO
If so, please attach documentation with this application.

ONSITE DIRECTOR/LEAD PHOTOGRAPHER

NAME				
TITLE				
ADDRESS				
CITY, STATE, ZIP				
PHONE	MOBILE/HOME		OFFICE	
EMAIL				

PRODUCTION DETAILS

PRODUCTION TITLE: _____

PROJECT TYPE:

- | | | |
|-------------------|-------------------|--------------|
| Feature Film | Corporate | PSA |
| Short Film | Educational | Social Media |
| Music Video | Documentary | Other |
| Television Series | Commercial | |
| Television Movie | Still Photography | |

IF OTHER, PLEASE SPECIFY: _____

PRODUCTION DETAILS, CONTINUED

CAST SIZE: _____ CREW SIZE: _____ TOTAL EXTRAS: _____ TOTAL # VEHICLES: _____

WILL THERE BE USE OF FIRE, EXPLOSIVES, GUNFIRE, ANIMALS, AND/OR DEPICTIONS OF CAR CHASE/CRASH SCENES?

YES NO

IF YES, PLEASE PROVIDE DETAILED EXPLANATION:

PLEASE PROVIDE A DETAILED DESCRIPTION AND OUTLINE OF THE PROJECT. DESCRIBE EFFECTS AND SCENIC DESIGN ELEMENTS. PLEASE INCLUDE ANY KNOWN OR POTENTIAL HAZARDS TO PROPERTY OR PERSON. ***PLEASE ATTACH ADDITIONAL PAGES AS NEEDED.***

LOCATIONS AND ACTIVITIES

PROVIDE MAP AND DESCRIPTION OF EACH LOCATION. Include streets, cross streets, and/or alleys to be used. Indicate all streets/sidewalks subject to closure or traffic/pedestrian control. Also indicate the location and quantity of generators, trucks, crew parking, catering location, and any other large equipment or vehicles. ***PLEASE ATTACH ADDITIONAL PAGES AS NEEDED.***

LOCATION	ACTIVITIES	DATE	START TIME	END TIME

LOCATIONS AND ACTIVITIES CONTINUED

WILL PARKING IN THE AREA NEED TO BE RESTRICTED DURING FILMING/PHOTOGRAPHY?

YES NO

WILL ANY SOUND AMPLIFICATION EQUIPMENT BE USED?

YES NO

IF YES, PLEASE PROVIDE DETAILED EXPLANATION:

SIGNAGE

DO YOU INTEND TO PLACE DIRECTIONAL AND/OR PROMOTIONAL SIGNAGE IN THE AREA?
THIS INCLUDES BUT IS NOT LIMITED TO: YARD SIGNS, FLIERS, ETC. ALL SIGNAGE IS SUBJECT TO CODE ENFORCEMENT GUIDELINES.

YES NO

DESCRIBE YOUR SIGNAGE PLAN IN DETAIL:

FOOD AND BEVERAGE

By submission of this application, the Applicant agrees to be solely responsible for assuring that each food vendor and every food handler has the appropriate permits and licenses. For further information, contact the appropriate County Board of Health office.

WILL FOOD BE **SERVED** AT YOUR EVENT? YES NO

DESCRIBE THE TYPE OF FOOD AND BEVERAGE, INCLUDING FOOD TRUCKS, TO BE SERVED:

ELECTRIC

WILL YOU USE WESTERVILLE ELECTRICITY? YES NO

WHAT ITEMS WILL REQUIRE ELECTRICITY?

ITEM(S)	LOCATION	AMPERAGE/ VOLTAGE REQUIREMENTS	DATE/TIMES

APPLICATION AGREEMENT AND SIGNATURES

I certify that I have read, understand and agree to abide by the policies and procedures of the City of Westerville as they pertain to the event I am proposing and the Film, Video and Photography permit I am hereby requesting. I also agree to comply with any special instructions noted on the approved permit. I understand that additional restitution for any damages to City property incurred during use will be my responsibility.

DATE OF APPLICATION: _____

PERMIT APPLICANT: _____

PRINTED NAME

SIGNATURE

POSITION/TITLE: _____

Completed permit application forms should be completed and returned no less than 15 business days prior to the planned production date. Please allow 5 days for processing.

Application may be submitted by email to specialevents@westerville.org or mailed to:

**CITY OF WESTERVILLE COMMUNITY AFFAIRS
ATTN: SPECIAL EVENTS
21 S. STATE ST.
WESTERVILLE, OHIO 43081**

Questions? Contact (614) 901-6400 or specialevents@westerville.org