



City of Sonoma
No. 1 The Plaza
Sonoma CA 95476
(707) 933-2229 or (707) 938-3332
FILM PERMIT APPLICATION
 Revised 12/3/15



Production Company: _____

On-Site Contact Person: _____ Phone Number: _____

Individual in Charge of Filming (if different): _____ Phone Number: _____ Fax: _____

Address: _____ City: _____ State: _____ Zip: _____

Film Date(s): _____

NOTE: NO FILMING ON FRIDAYS, SATURDAYS, SUNDAYS, HOLIDAYS, OR DURING EVENT WEEKENDS

APPLICANT PERMIT FEES:	\$706	(non-refundable)	= \$ _____
*Low Impact (video or still photo):	\$334	(non-refundable)	or = \$ _____
DEPOSIT (TBD) FILMING:	(refundable)		= \$ _____
DEPOSIT STILL PHOTO: \$300	(refundable)		= \$ _____
Subtotal (A)			= \$ _____

Reserved Parking: (\$238 + \$20 per space per day)	\$238 + (\$20 x _____ # spaces) x _____ # days:	= \$ _____
Note: 48 hours minimum notice to request reserved parking		
Street Closure: \$576 per permit = _____	Barricading: \$238 per location per day = _____	= \$ _____
Subtotal (B)		= \$ _____

Low Impact: No exclusive use of public streets, no closure of pedestrian areas, four or fewer crewmembers, no more than two cast members, no special effects.

FEES: (A) \$ _____; (B) \$ _____; = \$ _____ Receipt: _____ Date Paid: _____

Business License– Separate check = \$ _____ Receipt: _____ Date Paid: _____

Deposit – Separate check = \$ _____ Receipt: _____ Date Paid: _____

Codes: (Park 100-30702)

FILM PERMIT APPLICATION CONTINUED:

Production Title: _____

Production Type: () Still () Film () Video () Multimedia () Other

Classification: () Commercial () Industrial () Multimedia () TV

() Documentary () Educational () Feature () Short () Student

Note: Student and/or non-profit status must be supported by documented proof

Total Number of Crew: _____ **Total Number of Cast:** _____

Film Title / Story Summary: _____

Parking Request (provide sketch or describe location): _____

First time filming in Sonoma County? _____

Insurance Carrier: _____ Policy Number: _____

Note: *Must provide Insurance Certificate & General Liability Endorsement*

Details on Filming Dates, Hours and Location:

Sets / Structures to be erected: (Please attach sketch of structure.)

List and describe any Special Effects Planned: (i.e. Chases, Explosions, Shootings, Pyrotechnics, etc.)
(May require additional permits or clearances.)

Describe Street Requests:

Equipment and Vehicle Detail: Generators: _____ **Trucks / Cars:** _____

Sanitation Facilities: _____ **RV's:** _____

Describe any assistance requested from City or County Agencies and/or Employees:

SECTION 2 PARKING PLAN:

The Parking Plan must identify (1) vehicles used during filming and their locations, and (2) any scheduled street closures and how traffic will be rerouted. *(Attach additional sheets as needed.)*

SECTION 3 PRIVATE PROPERTY PERMISSION FORM:

"I hereby give permission for _____ to use my property located at _____ for the purpose of filming on the following dates: _____."

Date: _____ Signature: _____ Print Name: _____

SECTION 4 NOTIFICATION TO NEIGHBORHOOD:

Provide a copy of your notification to residents and businesses that are impacted by your filming production.

SECTION 5 PRIVATE SECURITY PLAN:

The security plan outlines what measures will be undertaken by the Film Company to provide any necessary security on location(s).

Applicant Agreement:

I, the undersigned, as applicant or on behalf of the applicant, signify that the information provided on this application is true and correct and hereby accept full responsibility for any breakage or damage as a result of the filming activity. I agree to indemnify, defend, and hold harmless the City of Sonoma, its officer, officials, employees and volunteers from and against all claims, damages, losses and expenses including attorney fees arising out of the negligent act or omission of myself, any agent, anyone directly or indirectly by them or anyone for whose acts by them may be liable, except where caused by the active negligence, sole negligence or willful misconduct of the City. This agreement requires that the City of Sonoma be named as "additionally insured" and that the applicants insurance apply on a primary and non-contributory basis, over any coverage the City of Sonoma may have. My signature below signifies that I agree to abide by all of the conditions of this application, which is considered a contract. I also agree to pay to the City of Sonoma all costs the City may incur as a result of any failure to comply with all of these conditions including damages of any kind whatsoever resulting from or arising out of the filming activity or issuance of the film permit.

Signature Print Name

Title Drivers License Date:

Approved: _____ Date: _____
City of Sonoma