

uthorization No.	
	For Internal Use Only
Rider No.	
	For Internal Use Only

# **Location Filming Permit Application**

Company Name: _			Fed Tax ID:
Company Address: _			
Contact Person:	Phon	e:	Email:
Name of Production: _		Type:	lm/TV/Still Photography/Student Film, etc.)
		(Feature Fil	Im/TV/Still Photography/Student Film, etc.)
Location 1 Name/Addre	<u>ess</u> :		
Type of Location:			
	Time(s): # of Cas		
Description of Filming	g Activities:	/Interior/Exterior Describe (	Page
Location 2 Name/Addre			
Type of Location:			
Date(s):	Time(s): # of Cas	t: # of Crew:	: # of Vehicles:
Description of Filming	g Activities:		
		(Interior/Exterior, Describe S	
Location 3 Name/Addre	<u>ess</u> :		
Type of Location:	-		_
	Time(s): # of Cas		
Description of Filming	g Activities:	/Interior/Exterior Describe	Page
Types/Numbers of Overs	sized Vehicles:(e.g. Cranes, Trailers, (	Craft Service, etc. Please identify	which locations have those items.)
Basecamp: Yes No	Basecamp Location:		
Special Services Reques	sted (Additional Lead Time May Be R	equired):	
Intermittent Traffic/Pe	edestrian Control No Parking Sign	s Street Closures	Unmanned Aircraft System
If requested, please expl			
Is property located in an		film O Van Na	
	ner obtained permission from HOA to		Vac. No.
Insurance Certificate Atta	•	er Consent Attached:	
regulations, as applicable, applicable rules, regulation conditions that are brought	and guarantees that, if this application s, and conditions. Furthermore, it is unde	is approved, the filming we erstood that all nuisances a filming activities when the	e Chapter 5-32 and such other rules and vill be operated in conformity with all the as well as non-compliance with applicable activity is in progress must be corrected the permit.
Applicant:		Date:	
City Approval:		Date:	

Fire Prevention Bureau 2400 Conejo Spectrum St, Thousand Oaks, CA 91320 Office: (805) 389-9738 Fax: (805) 388-4356

# FIRE PREVENTION FORM 643 FILMING QUESTIONNAIRE

PRODUCTION COMPANY: _				
NAME OF PRODUCTION:				
LOCATION OF FILMING:				
DATE(S) OF FILMING:				
Fire Department Film Review F	<sup>=</sup> ee:	\$320.00		
Fire Department Still Photograp	phy Review Fee:	\$160.00		
If any of the following will be pre and a Fire Safety Officer may be	•	ction site or bas	se camp area, a Fire C	ode Permit
Tents 401 to 1,600 square	feet:	\$200.00		
Tents greater than 1,600 s	quare feet:	\$360.00		
Pyrotechnics (explosives, s	squibs, open flam	e): \$280.00		
Additional Activities:	_		_	
Interior set construction:	<del></del>	No	☐ Yes	
Construction of structures:	<del></del>	No	☐ Yes	
Operation or landing of airc		No	☐ Yes	
Stunts:	Ш	No	☐ Yes	
The Fire Safety Officer is on the company. The current rate is \$8 and double time after 12-hours.	58.00 an hour with	•		
Contact Lori Ross, Filming Fire at <a href="mailto:lori.ross@ventura.org">lori.ross@ventura.org</a> .	Safety Coordinato	r, with any que	estions at (805) 947-85	35 or by email
Company Representative / Loc Contact Number:	cation Contact Nar			

# CITY OF SIMI VALLEY'S INSURANCE REQUIREMENTS LOCATION FILMING

These are the Insurance Requirements for film permit applicants. By completing the Location Filming Permit Application, you verify that you comply with and agree to be bound to these requirements. It is recommended that you check with your Insurance advisor(s) to verify compliance and determine if additional coverage or limits may be needed to adequately insure your obligations under these requirements. These are the minimum required and do not in any way represent or imply that such coverage is sufficient to adequately cover your liability under these requirements.

The applicant shall procure and maintain for the duration of the permit insurance against claims for injuries to persons or damages to property which may arise from or in connection with the activities or performance of work identified in the permit and the results of that work by the applicant, his agents, contractors, representatives, employees or subcontractors.

#### **Minimum Scope and Limit of Insurance**

Coverage shall be at least as broad as:

- 1. Commercial General Liability (CGL): Insurance Services Office Form CG 00 01 covering CGL on an "occurrence" basis, including products and completed operations, property damage, bodily injury and personal & advertising injury with limits no less than \$1,000,000 per occurrence. If a general aggregate limit applies, either the general aggregate limit shall apply separately to this project/location (ISO CG 25 03 or 25 04) or the general aggregate limit shall be twice the required occurrence limit.
- 2. Automobile Liability: ISO Form Number CA 00 01 covering any auto (Code 1), or if applicant has no owned autos, hired, (Code 8) and non-owned autos (Code 9), with limit no less than \$1,000,000 per accident for bodily injury and property damage.
- 3. Workers' Compensation: as required by the State of California, with Statutory Limits.
- 4. Aviation Liability Insurance (UAS/Drones): On an "occurrence" basis, including products and completed operations, property damage, bodily injury with limits no less than \$1,000,000 per occurrence, and \$2,000,000 in the aggregate.

## **Other Insurance Provisions**

The Insurance policies are to contain, or be endorsed to contain, the following provisions:

### Additional Insured Status

The City, its officials, officers, employees, agents, volunteers, and representatives are to be covered as additional insureds on the CGL policy with respect to liability arising out of work or operations performed by or on behalf of the applicant including materials, parts, or equipment furnished in connection with such work or operations. General liability coverage can be provided in the form of an endorsement to the applicant's insurance (at least as broad as ISO Form CG 20 10 11 85 or if not available, through the addition of both CG 20 10, CG 20 26, CG 20 33, or CG 20 38; and CG 20 37 if a later edition is used).

#### Primary Coverage

For any claims related to this application, the applicant's insurance coverage shall be primary coverage at least as broad as ISO CG 20 01 04 13 as respects the City, its officials, officers,

employees, agents, volunteers, and representatives and not call on the City's insurance for contributions.

#### Notice of Cancellation

Each insurance policy required above shall provide that coverage shall not be canceled, except with prior notice to the City.

#### Acceptability of Insurers

Insurance is to be placed with insurers authorized to conduct business in the state with a current A.M. Best's rating of no less than A:VII, unless otherwise acceptable to the City.

# Verification of Coverage

Applicant shall furnish the City with original Certificates of Insurance including all required amendatory endorsements (or copies of the applicable policy language effecting coverage required by this clause) and a copy of the Declarations and Endorsement Page of the CGL policy listing all policy endorsements to City before filming/work begins. The City reserves the right to require complete, certified copies of all required insurance policies and endorsements required by these specifications.

# Special Risks or Circumstances

The City reserves the right to modify these requirements, including limits, based on the nature of the risk, prior experience, insurer, coverage, or other special circumstances.

#### Hold Harmless

Verification:

Sign and provide the hold harmless agreement to include the defense and indemnification of the City. This obligates the applicant's/permittee's insurer or holds the applicant/permittee responsible in the event of insufficient or inadequate insurance.

Should you have any questions on insurance requirements, please contact the City's Risk Manager at (805) 583-6739.

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I have read and un	nderstand the	e above	requirements	and	agree	to	be	bound	by	them	for	any
filming activities id	entified in th	e permi	t application.									
					_							
Authorized Signatu	re				Ι	Date	e					

#### HOLD HARMLESS AND INDEMNIFICATION AGREEMENT

Applicant agrees to defend, indemnify, and hold harmless the City of Simi Valley and its officials, officers, employees, agents, and representatives from and against all claims, lawsuits, liabilities, or damages arising out of, in connection with, and/or relating in any manner to any act or omission of Applicant, its agents, employees, and subcontractors of any tier, and employees thereof, in connection with the performance or nonperformance of activities authorized by this application.

Applicant shall thoroughly investigate any and all claims, indemnify the City of Simi Valley, and do whatever is necessary to protect the City of Simi Valley and its officials, officers, employees, agents, and representatives as to any such claims, lawsuits, liabilities, expenses, or damages. The City of Simi Valley shall be included as an additional insured in the Applicant's liability insurance policies and endorsements.

Signature of Authorized Representative	Date
Name of Production Company/Production	