580 Pine Avenue, Pacific Grove CA Phone: (831) 648-3143

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**PACIFIC GROVE POLICE DEPARTMENT**

Film Permit Application

Please submit your completed Application by mail or in person at the Police Department. For questions, do not hesitate to us. Thank you.

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| *APPLICANT INFORMATION* |
| **Legal Name of Business:** |  | **Today’s Date:** |  |
| **Business Type:** |  |
| **Primary Contact Name:** |  | **Job Title:** |  |
| **Address:** |  |
| **Cell Phone #:** |  | **Secondary Phone #:** |  |
| **E-Mail Address:** |  |
| Local contact information for addressing any communication regarding this permit (if different). |
| **Local Contact Name:** |  | **Job Title:** |  |
| **Cell Phone #:** |  | **Secondary Phone #:** |  |
| **E-Mail Address:** |  |
| *EVENT DESCRIPTION* |
| Description of work intended to be done within the City. |
| **Proposed Date(s):** |  | **Proposed Time(s):** |  |
| **Activity:** |  |
| **Location(s):** |  |
| *EQUIPMENT & PERSONNEL* |
| **Equipment (Size, Weight, Use):** |  |
| **Vehicles (Size, Model, Use):** |  |
| **# of Vehicles:** |  | **# of Personnel** |  |
| **Additional Information:** |  |
| *ACTIVITIES* |
| Full disclosure of activities which will close or block streets or public areas for normal use for any periods of time, indicating the proposed time periods or schedules of each activity and the streets or areas to be involved (attach additional maps, layouts and pages if needed). |
|  |
| *INSURANCE CERTIFICATIONS* |
| Certification or other proof of public liability insurance covering the activity applied for in an amount or amounts as set by City Council resolution $1,000,000 (attach proof to this application). |
| *PAYMENT* |
| Invoice will be sent if film permit is approved. Fees include City staff time and other fees as applicable. |
| **Applicant’s Signature:** |  | **Date:** |  |
| *For Official Use Only* |
| Permit Approved By: |  | Permit Expiration: |  |
| Entered into TracNet By: |  | Date Entered: |  |