

CITY OF SAUSALITO PARKS & RECREATION DEPARTMENT 420 LITHO STREET, SAUSALITO CA 94965

T: 415.289.4152 • F: 415.289.4189

OFFICE USE ONLY
Date received:
Date to review:
Fees paid:
Approved by: Date:

CITY OF SAUSALITO FILM AND ENCROACHMENT PERMIT

CONTACTS					
Production Company Name:					
Company Address:			City:		
			Phone:		
			:		
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On Location Contact:	Producer:On Location Cell (required):				
PROJECT DETAILS Title or Product (required): Estimated Sausalito budget (required)	l):		Date(s): Jame" Talent:		
PRODUCTION TYPE / FEES If your production fits two categories Feature Film TV Series / Pilot TV Commercial Music Video Still Photography RUSH Fee (Applications not fully 50% surcharge	Docum Corpor Web C Short Studen	entary rate / Industrial ontent	ONE fee per day (the greater of the two) Other (specify): Fees: \$160 Still Photography \$270 Video, Documentary, Corporate, Industrial, Short \$475 Commercial \$675 TV Series, Feature Film \$423 ENCROACHMENT FEE (On City Streets/Sidewalks)		
PRODUCTION VEHICLES	Qty#		Size / Length EACH		
Honeywagon					
Wardrobe / Set Dressing / Props					
Production Van					
Camera Vehicle					
Grip / Electric Vehicle					
Caterering Vehicle					
Motorhome					
Other (Specify):					

CONDITIONS FOR APPROVAL:

- 1. PERMITTEE SHALL PROVIDE CITY OF SAUSALITO WITH A CERTIFICATE OF INSURANCE WITH THE CITY OF SAUSALITO, IT'S OFFICERS, AGENTS, AND EMPLOYEES NAMED AS ADDITIONAL INSURED IN THE AMOUNT OF \$1,000,000 AND AN ACCOMPANING CERTIFICATE OF **ENDORSEMENT (NO BLANKET OF ENDORSEMENT ALLOWED)**
- PERMITTEE MUST PUT THE FOLLOWING IN THE DESCRIPTION OF OPERATIONS BOX ON THE INSURANCE CERTIFICATE: The City of Sausalito, its officers, employees, elected and appointed officials, representatives, volunteers and agents are added as Additional Insured excluding workers' compensation and Employer's Liability policy as required by written contract but limited to the operations of the Insured under said contract and always subject to the policy terms, conditions and exclusions.
- 3. CITY SHALL HAVE THE PRIVILEDGE OF INSPECTING THE PREMISES COVERED BY THIS PERMIT AT ANY OR ALL TIMES.
- CITY MAY TERMINATE THIS PERMIT AT ANY TIME IF PERMITTEE FAILS TO PERFORM ANY COVENANT HEREIN CONTAINED AT THE TIME AND IN THE MANNER HEREIN PROVIDED. CITY AGREES IT WILL NOT UNREASONABLY EXERCISE THIS RIGHT OF TERMINATION.
- THE PARTIES HERETO AGREE THAT THE PERMITTEE, ITS OFFICERS, AGENTS AND EMPLOYEES, IN THE PERFORMANCE OF THIS PERMIT SHALL ACT IN AN INDEPENDENT CAPACITY AND NOT AS OFFICERS, EMPLOYEES OR AGENTS OF THE CITY.
- 6. NO ALTERATION OR VARIATION OF THE TERMS OF THIS PERMIT SHALL BE VALID UNLESS MADE IN WRITING AND SIGNED BY THE PARTIES
- 7. PERMITTEE WILL NOT DISCRIMINATE AGAINST ANY EMPLOYEE OR APPLICANT FOR EMPLOYMENT BECAUSE OF RACE, COLOR, RELIGION, ANCESTRY, SEX, AGE, NATIONAL ORIGIN OR PHYSICAL HANDICAP.

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Indicate Street Address OR Cross Street
Please List Locations In Sequence By Date And Time
Please continue page 3 if there are more than one locations

ate & Day Of Week	INT Start Time	End Time	Summarized Scenes:	
	ЈЕХТ]ВОТН			
ast & Crew On Locatio	n: Wet Downs	Street Closure		
Parking Request *In	clude map Ext. Dolly / Ji	b Pyrotechnics	List any other special equipment her	
Intermittent Traffic C	Control Generator * *size:	Simulated Vic	lence	
FICE USE ONLY:	Neighborhood Notification	Signature Sur	vey Police Services	
nditions:				
AY BY CASH	, CHECK,	OR CREDIT CARD: VISA, M	IASTER CARD, or AMERICAN EXPRESS	
Amount collected REDIT CARD INFORMATION:	Check #			
		Cardholder Signature:		
	ard):	Cardholder Sign	ature:	
rdholder Name (as appears on ca		Expires:	CVV CODE:	
rdholder Name (as appears on ca		Expires:		
rdholder Name (as appears on ca		Expires:	ty/ State/ Zip Code:	
ridholder Name (as appears on caurd #:	SALITO POLICE OFFICERS	Expires: Ci Ci Ci Ci Ci Cost of PE \$	CVV CODE: ty/ State/ Zip Code: MBER RMIT DST	
richolder Name (as appears on caurd #:	POLICE OFFICERS REQUIRED PARK RENTAL FEE I be determined by the on fee must be received before	PERMIT NU \$ COST OF PE \$ PARKING CO \$ APPLICATIO	CVV CODE: ty/ State/ Zip Code: MBER RMIT DST	

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D-1- 0 D-1 06 M-1		Start Time	End Time	Summarized Scenes:
Date & Day Of Week	EXT BOTH	Start Time	End Time	Julillianzed ocenes.
# Cast & Crew On Local Parking Request Intermittent Traff	t *Include map	Wet Downs [Ext. Dolly / Jib [Generator * *size:	Street Closure Pyrotechnics Simulated Vio	List any other special equipment here
OFFICE USE ONLY: Conditions:	Neighborh	nood Notification	Signature Sun	vey Police Services
Date & Day Of Week	INT EXT BOTH	Start Time	End Time	Summarized Scenes:
# Cast & Crew On Local Parking Request Intermittent Traff	t *Include map	Wet Downs [Ext. Dolly / Jib [Generator * *size:	Street Closure Pyrotechnics Simulated Vio	List any other special equipment here
OFFICE USE ONLY: Conditions:	Neighborh	nood Notification [Signature Sun	vey Police Services
Date & Day Of Week	INT EXT BOTH	Start Time	End Time	Summarized Scenes:
Cast & Crew On Loca Parking Request Intermittent Traffic	*Include map	Wet Downs Ext. Dolly / Jib Generator * *size:	Street Closure Pyrotechnics Simulated Viole	List any other special equipment here