



Town of Bay Harbor Islands
9665 Bay Harbor Terrace
Bay Harbor Islands, FL 33154
Tel: (305) 866-6241 Fax: (305) 866-4863
www.bayharborislands.org

Film Permit Application

Project Name: _____

Production Company Name: _____

TO BE FILLED OUT BY THE TOWN OF BAY HARBOR ISLANDS:

Film Permit Fee: _____

Insurance: Yes No

Meter Fee (if applicable): _____

Payment Received: Yes (Date)

Contact and Production Information for Film Permit

COMPANY INFORMATION:

Production Company Name:			
Permanent Address:			
City:	State:		Phone:
Local Production Office Address:			
Local Production Office Phone:			Fax:

CONTACT INFORMATION:

1. Producer:	Phone:	Email:
2. Production Manager:	Phone:	Email:
3. Location Manager:	Phone:	Email:
4. Asst. Location Manager:	Phone:	Email:

PRODUCTION LOCATION: _____

PRODUCTION INFORMATION:

This project is (check one):

- | | | | |
|--|--------------------------------------|--|--|
| <input type="checkbox"/> Feature Film | <input type="checkbox"/> Music Video | <input type="checkbox"/> Television Programming | <input type="checkbox"/> Documentary |
| <input type="checkbox"/> Corporate Video | <input type="checkbox"/> Short Film | <input type="checkbox"/> Public Service Announcement | <input type="checkbox"/> Still Photography |
| <input type="checkbox"/> TV Movie | <input type="checkbox"/> Commercial | <input type="checkbox"/> Other as specified: | |

Number and type of production vehicles :
Vehicle Info: (Make, Model, Tag # and Year)

Production Equipment to be utilized:

Size of Crew:

Total Number of Filming Days in the Town of Bay Harbor Islands: _____

Brief description of project:

Time trucks are scheduled to arrive at site: _____

Time trucks are scheduled to depart site: _____

I hereby apply for permission to use or occupy public property, for the sole purpose of filming,

At (Exact Address): _____

Shooting Date(s): _____

Shooting Time: _____

Use the space below to itemize anticipated additional services:

- Police Other as specified:

Number of Police Officers requested: _____

Describe in detail the film activity that will be taking place at this location:

Describe what steps you have taken or will take to notify affected residents and/or businesses:

Parking Meter Numbers (if applicable):

ATTACH THE FOLLOWING DOCUMENTS:

Parking Plan: (Production Vehicles and Crew Vehicles)

A certificate of insurance demonstrating a current and active public liability insurance policy in an amount not less than \$1,000,000, which shall name the Town as an additional insured, is required.

According to Section 21-5(g), Production Company will need to submit a certified list of property owners within 375 feet (See attached list of providers).

I understand that in applying for a film permit in the Town of Bay Harbor Islands it is my obligation to understand and comply with the rules and regulations of the Town of Bay Harbor Islands. I acknowledge receipt of a copy of the Town's Ordinance No. 882.

Applicant's Signature: _____

Date: _____

INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED

OFFICIAL USE ONLY

Council Approval Required? Yes No

Council Approval Date:

Town Manager / Assistant Town Manager _____ Date: _____