

1700 W. 162nd Street, Gardena CA 90247 **TEL:** (310) 217-9518 **EMAIL:** CDDLicenseandPermitCenter@cityofgardena.org

#### **Film Production Permit Application**

Pursuant to the Gardena Municipal Code (GMC) Section 5.36.040, the permit application fee must accompany the application for the purpose of defraying costs of processing. The fee shall be the property of the City and shall be retained, whether the permit is granted or denied.

Name of the Company Requesting Film Permit	
Company Address	
Name of Person Requesting Film Permit (Contact Representation	ative)
Telephone No.	Email
Name of Film Production Company/Applicant	
Address	
Telephone No.	
Total No. of Participants Involved	Parking: □ Off-Street □ On-Street □ Both
Applicant intends to use the following (describe all that appl  Animals  Chemicals  Explosives  Other	y):  Pyrotechnics  City Facilities*  City Streets*  None of the Above
*Use Agreement Required in addition to Film Permit	



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Filming Location		
Date	Time	
Property Owner		
Mailing Address	Phone No.	
Filming Location		
Date	Time	
Property Owner		
Mailing Address	Phone No.	
Filming Location		
Date	Time	
Property Owner		
Mailing Address	Phone No.	
Detailed Description of Scenes (Describe by Date and Location	on)	

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On behalf of the film production company, I hereby agree to defend, indemnify, and hold City, its elective and appointive officers, agents, employees, and volunteers harmless from any claim, demand, damage, liability, loss, cost, or expense for any damage whatsoever, including but not limited to death or injury to any person and injury to any property arising from the performance of the film production company's activities. The City shall not waive any rights against the film production company by any acceptance or deposit by the film production company of insurance policies. I understand that if the requirements of the GMC Section 5.36, Film Production Policies and Procedures and/or any applicable conditions set forth are not met that our use will not be permitted or may be terminated.

Signature with Title		Date
FOR CITY USE ONLY		
Each department listed below is requested to indicate terms and conditions that must be met before permit will be issued.		
Police Department		
Supplemental Personnel Required: □ No □ Yes		
Comments/Recommended Conditions are as Follows (attach additional sheet, if necessary):		
Signature		
Title	Date	
LA County Fire Department		
□ Proof of Motion Picture/TV Filming Permit is Attached		



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TEL: (310) 217-9518 EMAIL: CDDLicenseandPermitCenter@cityofgardena.org **Business License** ☐ Proof of \$1,000,000 General Liability and \$1,000,000 Auto Liability ☐ Proof of Conformance with Federal and State Worker's Compensation Requirements ☐ Proof of Noticing/Approval of Businesses/Residents in Area of Production ☐ Proof of Permit Fee Exemption: Non-Profit or Student Film Status Signature Title Date **Community Development Director or Designee** ☐ Administrative Approval of Permit is Hereby Granted ☐ Approval of Permit is Hereby Granted with Conditions Listed Below ☐ Permit is Hereby Denied Conditions of Community Development Approval are as Follows: 1. 2. 3. 4. 5. Signature Title Date

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#### **Supplemental Employment Proposal**

Employer's Name	Date		
Employer's Address	Phone No.		
Local Address	Phone No.		
Nature of Current Business			
Name of Person to be Contacted			
Address			
Phone No. Hours/Da		ys Available	
Type of Work Proposed for City Employees	l .		
Duration of Proposed Employment	From	То	
Hours of Proposed Employment	From	То	
Days of Proposed Employment (circle appropriate days): M T W Th F Sat Sun			
Reason City Employees are Desired			
List and Special Conditions or Hazards Involved in the Proposed Employment			
City Use Only: Department Review			
City Department	Date Rcvd	Ву	
Proposal: ☐ Approved ☐ Not Approved	Date	Ву	
If not approved, state reason:			

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If approved, list number of personnel required by classification:

Classification of Employee(s)	Number of Employee(s)	Hourly Rate x 1.5	Hours Required	Total Cost

If the employment is ongoing, the annual or monthly deposit required of the employer shall be determined by the City Finance Department.

#### **Verification of Deposit of Funds**

Funds Received On (Date)	Ву
Deposit of Funds Verified (Date)	Ву

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