# FILMING PERMIT APPLICATION GUIDELINES

1. Please fill out the filming permit application form. Attach a detailed description of the project if needed.

2. Please submit your certificate of insurance at the same time as the permit application.

3. Noticing of neighboring residences and businesses is required unless applicant can show that it is not applicable. Notices should be distributed 48 hours before any filming activity is to take place. Notices should include the location, dates and times of all anticipated filming activities, including anticipated set-up and break-down times. Notices should include a contact number for the filming applicant. The City's contact number (510-528-5710) should also be included on the notice.

4. If filming will be in or near a City Park, filming times must be within the regular open hours of the park, unless a specific request for additional times is requested and granted by the Recreation and Community Services Director. Depending upon the request, a signature survey of adjacent neighbors may be requested in this situation.

5. Film permit fees are $500 for up to 3 days and $100 every additional day (Fiscal Year 2024-25), plus any city cost and the fee for an encroachment permit that may be required if the filming impacts the public right-of-way (sidewalks, parking, etc.). Fees are in the City's Master Fee Schedule, which may be found online at www.albanyca.gov. Student films and non-profit films may request a waiver of fees.

Contact Information:

Anne Hsu
City Clerk
City of Albany
1000 San Pablo Avenue
Albany, CA 94706
Email: ahsu@albanyca.org
TEL: (510)528-5763

*Thanks for filming in Albany!*

# *City of Albany*

## FILMING PERMIT APPLICATION
## 1000 San Pablo Avenue - Albany, CA 94706

Application Date: _____Project Name: _____

Film Company or Individual Applying _____

Type of project: _____
(student project, training, non-profit, commercial film, etc.)

Contact Person_____

Daytime & Evening Telephone Numbers_____

Company Mailing Address_____

Email Address _____

Filming Location(s) Requested

_____

_____

Date(s) Requested _____

Times: From _____ To _____

Approximate Number of Participants _____

Number/Type of Vehicles _____

Assembly Area _____

**Describe your project, attach a separate page with project details, if needed:**

_____

_____

_____

_____

_____

Project Name_____

| | | |
|---|---|---|
| Use of Public Right-of-Way? | Yes _____ | No _____ |
| Will Traffic Control be Needed? | Yes _____ | No _____ |
| Use of Street Barriers Requested? | Yes _____ | No _____ |
| Use of Pyrotechnics or any type of Weapons? | Yes _____ | No _____ |
| Delivery of Barriers Requested? | Yes _____ | No _____ |

***If you check yes to any of the above questions, please describe in detail on a separate sheet. Additional fees may apply pursuant to the current City of Albany Master Fee Schedule.***

It is understood and agreed that any special conditions must be complied with. Group Insurance must be obtained with a single limit coverage applying to Bodily and Personal Injury and Liability Damage in the amount of $1,000,000. The City shall be named as an additional insured on the policy. Film permit fees are pursuant to the current Master Fee Schedule.

_____ _____

Film Company Representative Signature Date

_____

Title/Position

Project Name_____

## DEPARTMENTAL APPROVALS

**FIRE COMMENTS:** _____
_____
_____

Recommend: Approval ☐ Denial ☐.

**POLICE COMMENTS**: _____
_____
_____

Recommend: Approval ☐ Denial ☐.

**COMMUNITY DEVELOPMENT & ENVIRONMENTAL RESOURCES COMMENTS:**
_____
_____
_____

Recommend: Approval ☐ Denial ☐.

**RECREATION & COMMUNITY SERVICES COMMENTS:** (Required if City Parks will be used)
_____
_____
_____

Approved (if required) Yes ☐ No ☐.

**PUBLIC WORKS COMMENTS:** _____
_____
_____

Recommend: Approval ☐ Denial ☐.

***The filming company or representative shall pick-up street barriers, place the barriers and return them to the Maintenance Center. Otherwise a Barrier Fee will apply.***

Is Barrier Fee Being Applied? Yes ☐ No ☐.

Project Name_____

**CITY MANAGER'S OFFICE:**

Group Insurance must be obtained with a single limit coverage applying to Bodily and Personal Injury and Liability Damage in the amount of $1,000,000. The City shall be named as an additional insured on the policy.

IS PROOF OF INSURANCE ATTACHED? Yes ☐ No ☐.

Have appropriate Department Heads given their approval? Yes ☐ No ☐.

CHECK THAT FEES HAVE BEEN PAID? Yes ☐.

**APPLICATION IS: Approved ☐ Denied ☐.**

_____ _____

Approval Signature Date