

APPLICATION TO FILM IN LAKELAND

This application, certificate of insurance and all other required documents must be received before filming, video or photo shoot can begin. Please have your permit available at all times while on location.

PRODUCTION COMPANY	
ADDRESS	CITY/STATE/ZIP
APPLICANT/CONTACT PERSON	TITLE
ON-SITE PRODUCTION COORDINATOR	
PHONEFAX	MOBILE
E-MAIL	
CLIENT/AGENCY	
ADDRESS	CITY/STATE/ZIP
PHONEFAX	
WEBSITE	
<u>TYPE OF PRODUCTION</u> () Feature Film () Television (() Corporate/Industrial () Still Photography () M () Other:	lusic Video () Student Project () Independent Film
PRODUCTION TITLE:	
GENERAL DESCRIPTION OF THE PRODUCTION:	
() Special Effects/Pyrotechnics () Animals/Types	
() Airplanes/Helicopters/Boats () Stunts	

INSURANCE A copy of the certificate of insurance in the amount of \$1,000,000 must be submitted with the application to be processed. **Certificate Holder should be: City of Lakeland, 228 South Massachusetts Avenue, Lakeland, FL 33801**. Please note: Private property owners may have additional insurance requirements.

Return this form to: Kevin Cook, Director of Communications: <u>kevin.cook@lakelandgov.net</u>. Phone: 863/834-6264

LOCATIONS (Please submit additional locations in an attachment, including maps if available. Parking fees may apply.)

Production Location + Brief Schedule	Dates & Times (Including Rain Dates + Times)				

ADDITIONAL CITY/COUNTY ASSISTANCE () Off-duty police officer(s)* () Street/Sidewalk Closing** () Parking () Fire Department

() Other: _____

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DESCRIPTION:

* An off-duty police officer is required for any type of closing at each end of the closure. Off-duty rates vary **An additional Special Event form is required when closing a street or sidewalk/walkway and must be approved by the City of Lakeland.

Stunts	Explosives	Firearms	Fireworks	Incendiary Devices	Other	
Explain:						

ECONOMIC IMPACT

Submitting the following information continues to make filming successful in Polk County. While we are required by Visit Central Florida to report general numbers, your specific information is kept confidential. Thank you for filming with us!

Arrival Date	Departure Date _			AL # Produ	uction Da	ys	
Please list below amount spent in Polk County:							
Hotel/Property Name(s):							
Date							
Rooms Booked							
Total # Rooms booked at Hotel	ls/Apartments/Co	ondos		_ \$			
Total Cast				\$			
Total Crew				\$			
Rental (Equipment/Studio/Stage/Vehicle)			\$	\$			
Location Fees (fees, police, security, etc.)			\$	\$			
Local Catering			\$	\$			
Post Production Services			\$				
Miscellaneous (gas, utilities, cleaning services, etc.)			\$				
Total amount spent within Polk County/City of Lakeland			\$				
Approximate TOTAL project budget (overall)		\$					

Florida Tax Exemption? Y
N

The applicant shall assume all risk in the use of City/County property in the permitted operation and shall be solely responsible and answerable in damages for all accidents and injury to person or property and shall indemnify and keep harmless the City/County and its officers and employees from any and all claims, suits, losses, damages or injury to person or property.

APPLICANT CERTIFICATION:

The applicant agrees to abide by the provisions of the City/County/State Codes pertaining to Motion Photography Production, as represented by this permit and any attachments. In addition, the applicant agrees to restore location production sites to the condition existing immediately prior to production. This permit is to be in possession of the production company at all times while on location and must be presented upon demand by any City/County/State authorized agent. The person whose signature appears below certifies that he/she is an authorized agent of the applicant and is duly authorized on the applicant's behalf to execute this application.

INDEMNIFICATION:

The applicant indemnifies and holds harmless the **City of Lakeland, a municipality of the State of Florida**, its officers and employees, from and against all claims, damages, losses and expenses, including reasonable attorney's fees, arising out of or resulting from the acts or omissions of applicant, its contractors, subcontractors, their employees, agents or servants, during the filming and all activities associated therewith for which this application is filed, including the use of any city owned property.

INSURANCE CERTIFICATE:

An Insurance Certificate additionally insuring **City of Lakeland, 228 South Massachusetts Avenue, Lakeland, FL 33801** as the Certificate Holder, in the amount of no less than \$1,000,000 or \$5,000,000 in the case of explosives/stunts, must be attached to this application.

APPLICANT SIGNATURE	
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_____ DATE_____

NAME & TITLE (PRINT) _____

Signature/Director of Communications

Approved/Date

REQUIRED DOCUMENTS TO BE INCLUDED WITH THE PERMIT APPLICATION

□ Neighborhood Letter (if applicable)

If filming at a residence, please attach a letter to be distributed to surrounding neighbors within a 500 ft. circumference on the immediate left, right, front and back.

□ Business Letter (if applicable)

If filming at a business, please attach a letter that you will distribute to surrounding businesses within a 500 ft. circumference, as well as signed consent from businesses on the immediate left, right, front and back.

□ Map

If filming at a residence/business where you will be parking your production/crew vehicles on the street, please include a map that indicates where vehicles will be parked.

Also, if filming at a park, please include a map that indicates where you will be filming on park property. Certain parks require a separate Film Permit and/or additional information.

□ Certificate of Insurance

All filming on public property within the City of Lakeland requires applicants to produce a certificate of insurance in the amount of \$1,000,000. Certificate Holder should be: **City of Lakeland, 228 South Massachusetts Avenue, Lakeland, FL 33801**. Please note: Private property owners may have additional insurance requirements.