

City of Coral Gables Community Recreation FILM AND PHOTOGRAPHY PERMIT

PERMIT #:	

Today's date: _____

. Contact Person for this permit appli	ication:		Phone:	Fmail [.]	
Permit applicant address:					
Permit applicant phone:					
Is the Contact Person an officer of					
Is the contact person an authorized			·	on (authorized agent)	·
with a limited power of attorney evid agreement must be executed (sign	dencing that they ar	re authorized to exec	ute legally binding contracts on		
Client:					
Please provide a map or picture of	location site for clea	ar identification.			
Location 1 (Name and address):_					
Film dates:		No. of days:	Hours: Start	End	
Location 2 (Name and address):					
Film dates:		No. of days:	Hours: Start	End	
Location 3 (Name and address):_					
Film dates:					
. Classification: ☐ Commercial ☐ Student project			a □ Documentary □ Fea		l
. Total personnel:	Est. expenditures: \$	\$			
Total vehicles/equip:					Other
Generato		Trucks	Catering vehicle	Vans	
Generato Insurance carrier:			<u>-</u>		
Generato			<u>-</u>		
Generato Insurance carrier: Description:			-		
Generato Insurance carrier: Description: Parking requirements:					
Generato Insurance carrier: Description: Parking requirements:			-		
Generato Insurance carrier: Description: Parking requirements:		ıll that apply			
Insurance carrier: Description: Parking requirements:	o; If so, please list a	ill that apply	FICATION:		

The Permit Applicant jointly and severally, hereby hold harmless, indemnify and defend the City of Coral Gables, its representatives, officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions on the part of the Permit Applicant or any of the participants of the Event outlined in this application. This indemnification provision shall survive the termination of this contract and shall be in full force and effect beyond the term or termination of this contract, however, terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under section 440.11, Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the City may have under the doctrine of sovereign immunity of section §768.28, Florida Statutes.

Permittee agrees to all the terms and conditions of this permit, including provisions on the reverse side of this form and any attachments; agrees to obtain prior City approval for deviations from the information provided herein; and understands that failure to comply with these requirements may result in the immediate cancellation of production.

Weather Note: Renewable without fee, if weather conditions are unfavorable for shooting.

Applicant/Title	Date
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Coral Gables Community Recreation 405 University Drive, Coral Gables, FL 33134 305-460-5607

specialevents@coralgables.com
Visit us on the web at www.gablesrecreation.com

NOTES:

OFF	FICE USE ONLY				
OFF	ICE USE ONLY				
Date received:	Date Permitted:				
Parking meter numbers: #	_ # #				
Have business owners and/or residence been notified?	☐ Yes ☐ No Shot in the City of Coral Gables? ☐ Yes ☐ No				
Reviewed by: ☐ Police ☐ Fire ☐ Traffic-Engineering ☐ Maint. Services ☐ Risk Management ☐ Film Liaison					
PHOTO FEES: \$ 001-329-830	APPROVED DATE				
TOTAL FEES: \$					
Type of permit:	APPLICATION COMPLETION CHECKLIST:				
☐ A. Public property-still photography	☐ Film and Photography Permit				
☐ B. Public property- motion picture/video	☐ Certificate of Insurance (COI)				
☐ C. Residential- large still/commercial/video	☐ Site Diagram (Showing Film and Parking Areas)				
☐ D. Residential- major motion picture	☐ HOA Approval				
	☐ Homeowners Approval				
	☐ Neighborhood Notification Letter				
	□ Neighborhood (Hours: Start) Approval				

◆THIS COVER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS◆ Legal Name of Permit Applicant (Individual or Company): Insurance is being submitted for ongoing Filming Operations **YES** NO Film Insurance is being submitted for a onetime Film Permit YES NO **Permit** (Check YES next to onetime Film Permit if you do not anticipate performing any film shoots in the City during the next 12 months and this film shoot is a onetime event). Cover Without limiting PERMIT APPLICANT'S indemnification of the CITY, and during the term of this Sheet Agreement, PERMIT APPLICANT shall provide and maintain at its own expense the below described programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY and For shall be primary to and not contributing with any other insurance or self-insurance program maintained by the CITY. Certificates or other evidence of coverage shall be delivered via email, fax or US mail to; Evidencing Insurance Certificate Holder should read: City of Coral Gables to the City of **Insurance Compliance Coral Gables Email address:** PO Box 12010 - CE cityofcoralgables@ebix.com Hemet, CA 92546-8010 Such certificates or other evidence of coverage shall be delivered prior to commencing performance under this Permit, and shall contain the express condition that the CITY is to be given written notice of at least thirty (30) days in advance of any cancellation, non-renewal or material change of any insurance policy. Companies & Commercial Shoots are required to evidence the following Insurance to the City; Insurance <u>Insurance Coverage Type</u> Limit of Liability Required Requirements Commercial General Liability Each Occurrence \$1,000,000 Aggregate \$2,000,000 Liquor Liability (required if liquor is served) Each Occurrence \$1,000,000 Aggregate \$2,000,000 For All insurance policies evidenced to the City shall name the City of Coral Gables as an Additional Companies Insured on a Primary and Non-contributory basis. All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement in favor of the City of Coral Gables. and/or All insurance companies providing coverage must have an A.M. Best rating of at least (A-/VI) or an equivalent rating given by a recognized rating agency. Commercial **Shoots** When evidencing insurance to the City, the following documents must be provided; This Cover Sheet with all of the questions above answered. 2. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured on a primary and non-contributory basis including a Waiver of Subrogation in favor of the City. 3. A copy of the Endorsements evidencing that Additional Insured status has been provided to the City and that this coverage has been provided on a Primary & Non-Contributory Basis. A copy of the all Waiver of Subrogation Endorsements for each line of coverage required. Individuals are required to evidence the following Insurance to the City; Insurance <u>Insurance Coverage Type</u> Limit of Liability Required Requirements Personal Liability Insurance Each Occurrence \$300,000 When Individuals evidencing insurance must provide the following documents to the City; Not a This Cover Sheet with all of the questions above answered. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured. Commercial City of Coral Gables Insurance Compliance Contact Information **Shoot** Phone: (951) 652-2883 • Fax: (770) 325-0417 • Email: cityofcoralgables@ebix.com