



Official Use Only

Date Received _____
Initials _____

Parks & Recreation Department
 323 Church Street
 Santa Cruz, CA 95060
 Ph: (831) 420-5270 | Fax (831) 420-5271
parksandrec@cityofsantacruz.com
www.santacruzparksandrec.com

**USE APPLICATION FOR CITY PUBLIC SPACES
 FILM, VIDEO AND PHOTOGRAPHY PERMIT APPLICATION**

Applicant Information:

Primary Contact Name (First, Last): _____

Address: _____ City _____ State _____ Zip _____

Phone: _____ Email: _____

Cell Phone: _____ Website: _____

Company Information:

Contact (First, Last): _____ Cell Phone: _____

Company name: _____

Address: _____ City _____ State _____ Zip _____

Event Information:

Filming Location(s):	Event Timing		
		Start Time	End Time
Filming Date(s):	Setup		
Personnel Involved		Principal Recording	
Cast:	Crew:	Breakdown	

Project Title: _____

Film TV Photography Streaming Student Project Other: _____

Project Description: _____

Location Manager (First, Last): _____

Email: _____ Cell Phone: _____

Director or Onsite Producer (First, Last): _____

Email: _____ Cell Phone: _____

1	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you successful received a permit previously?	Project Title:
2	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will electrical access be needed?	Electricity may be provided for an additional fee.
3	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will parking be reserved for cast/crew?	Additional fees incurred will be negotiated during the permitting process.
4	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will parking be reserved as part of filming?	Specify Parking Lot(s) and requested Meter(s) in additional information on page 3.
5	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Is a street closure being requested?	Purpose of closure:
6	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will vehicles be moving within the closed street?	Type and Speed Involved (please include on page 3).
7	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you read, considered and agree to abide by the rules and regulations related to requirements for street closures?	
			A 16' clearance in the street must be maintained for emergency vehicle access. In addition, there are standard requirements for street closure barricades. The document entitled "Requirements for Street Closure – Barricades" must be reviewed and complied with by Block Party Coordinator/Permittee. The document also includes requirements regarding adult monitors as well as how to safely close the street.	
8	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will a generator be used?	Quantity, size & type (please include on page 3).
9	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you have a security plan?	If yes, include as attachment.
10	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you have a restroom facility plan?	If yes, include as attachment.
11	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you have a garbage/recycling plan?	If yes, include as attachment.
12	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will there be Special Effects utilized?	Pyrotechnics require a permit from the SC Fire Dept.
13	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will animals be used?	Quantity and Type (please include on page 3).
14	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will a drone (Unmanned aircraft System) be used? (see 16 for requirements)	
15	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will you be using any temporary structures?	Stages and Bleachers or other structures may require building department approval.
16	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will a helicopter be used?	Approval from FAA, NOAA and other agencies must be coordinated by applicant.
17	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Will sound amplification be used?	
18	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Have you read, considered, and agree to abide by the rules and regulations for sound amplification?	
			<ul style="list-style-type: none"> No person shall, between the hours of 10:00 pm and 8:00 am, be permitted to make any offensive noise within 100 feet of any building or place regularly used for sleeping purposes or which disturbs any person within hearing distance of such noise. (SCMC #9.36.010) No person shall make, suffer or permit to be made any noises or sounds which are unreasonably loud, raucous, jarring or disturbing to people of ordinary sensitiveness. (SCMC #9.36.020) <p>Any person who violates any section of this chapter and is cited for such a violation, and who within forty-eight hours after receiving such a citation again violates the same section, is guilty of a misdemeanor. A person is cited for a violation when he or she is issued and signs an infraction or misdemeanor citation, or when he or she is arrested and booked, or when a complaint is filed and the person is notified of the filing of such a complaint (SCMC #9.36.030)</p>	

**** If you marked 'yes' to any question above, please use additional pages to expand and provide additional details. If there are multiple locations, please provide information for each proposed location.**

Equipment and Audio-Visual Materials (Use additional sheets if necessary):

	Quantity	Type (Please indicate make and model.)
<input type="checkbox"/> Camera(s):		
<input type="checkbox"/> Lighting:		
<input type="checkbox"/> Sound:		
<input type="checkbox"/> FX/Vehicles:		
<input type="checkbox"/> Other:		

Additional Information not listed above:



AGREEMENT AND SUBMITTAL OF INFORMATION

A completed application package, with associated forms, are required for permit consideration and final approval. Completed applications include:

- Application Form
- Site Map and Location Markers
- Insurance Certificate and Endorsement
- FAA Certification and/or other required documents if requesting drone use
- Non-Refundable Application Fee

By signing this application, I declare, under penalty of perjury, that the information contained in the foregoing application is true and correct to the best of my knowledge and understanding.

Name of Applicant (Print): _____

Signature: _____ Date: _____

Application, completed documents and fees should be submitted to the Event Permits Office. Checks should be made payable to the City of Santa Cruz, Visa and MasterCard are also accepted by calling (831) 420-5270.

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