Welcome to Piedmont! The City of Piedmont has a permitting process for filming. Our process is modeled after the suggested format of the California Film Commission. Attached are the guidelines for filming as well as all applications necessary to apply for a permit.

The City of Piedmont would like to help in any way we can to accommodate your filming needs, but ask that you keep in mind that the City of Piedmont is primarily a residential community. To ensure that our residents are given adequate notice of filming activity, there is a ten-day notification period associated with the request for a permit. Applications must be submitted at least 5 business days in advance of the desired date of neighbor notification.

The filming coordinator for the City of Piedmont can be reached by telephone at (510) 420-3050 or by mail at 120 Vista Avenue, Piedmont, CA 94611. Please do not hesitate to call if you have any questions regarding the filming permit process or the community.

Thank you for selecting our community. We look forward to working with you!

FILMING PERMIT CHECKLIST

Listed below are the items that must be submitted in order to obtain a Filming Permit

_____ Filming Permit Application and Fee ($1,540 - still photography; $1,845 - commercial video; $2,295 - motion picture video)

_____ City of Piedmont Business License Tax ($500 per day + $4 State Disability Access Programs Fee)

_____ Copy of Insurance

_____ Indemnification Agreement

_____ Completed Neighborhood Notification Form and Affidavit of Service (Please note: There is a ten-day notice period associated with filming permits)

_____ Special Use of Street Permit

_____ Parking Plan
CITY OF PIEDMONT
FILMING PERMIT

Name of Film/Project

Filming Location

Filming Date(s)

Alternate Filming Date(s)

Hours (time of arrival at site through departure)

Activities

Approximate Number of Participants (cast and crew)

Please Indicate the Type and Number of Vehicles and Other Equipment

<table>
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<tr>
<th>Number</th>
<th>Type of Vehicle</th>
<th>Approx. Length of Vehicle (ft)</th>
<th>Overnight Parking (Y/N)</th>
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Request for Special Assistance

☐ Traffic Control
☐ Street Closure
☐ Emergency Services

Please indicate any other special assistance you may need

____________________________________________________________________________________

____________________________________________________________________________________
APPLICANT DATA

Applicant_______________________________________________________________________
Business Name__________________________________________________________________
Address________________________________________________________________________
Mailing Address (if different from above) ___________________________________________
Telephone Number_____________________ Fax Number________________________________

Location Manager

Please indicate the name of the person in charge of the location and responsible for applicant's and applicant's employees' conduct:

Name__________________________________________________________________________
Address________________________________________________________________________
Telephone Number_____________________ Fax Number_______________________________

Emergency Notification

Please indicate at least two persons to be contacted in the event of emergency situations which might alter the conditions of the film permit

Name__________________________________________________
*Address_______________________________________________________________________
24-hour phone number__________________________ Fax Number_______________________
*At least one contact person must be located within 25 miles of the City of Piedmont

Name__________________________________________________________________________
Address________________________________________________________________________
24-hour phone number___________________________ Fax Number_______________________

________________________________________
APPLICANT SIGNATURE

Signature of Applicant/ Date
*Principal Officer

Principal Officer Date

*If the applicant is a corporation, the application shall be signed by the two principal officers of the corporation.
PROPERTY OWNER

Please complete if the proposed filming or taping involves the use of private property

Name of Property Owner__________________________________________________________

Property Owner’s Address (if different from above):____________________________________

Property Owner’s Phone Number____________________ Fax Number_____________________

I grant permission to ___________________________________________ to use my property located at ______________________________ , Piedmont, California for the purpose of filming or other activities as indicated on this permit.

__________________________________
Signature of Property Owner

Date
☐ The proposed filming or videotaping for motion picture or television production is conducted by a nonprofit organization which qualifies under Section 501(c)(3) of the Internal Revenue Code or Section 23701 of the California Revenue and Taxation Code as a charitable organization, and no person, directly or indirectly, receives a profit from the marketing or production of the film or tape or from showing the film, tapes or photos.

*Please attach reasonable proof thereof.*

__________________________  ________________________
SIGNATURE OF APPLICANT    DATE
INDEMNIFICATION AGREEMENT

This agreement is made and entered into as of this______________ day of _____________________________, 20__, by and between the CITY OF PIEDMONT, (hereinafter referred to as ACITY@) and _________________________________ (hereinafter referred to as APPLICANT@) in connection with the application by Applicant to City for the issuance of a filming permit.

As a condition to the issuance of such filming permit by City, Applicant agrees to defend, indemnify and hold the City harmless from and against any and all losses, liability, claims, action, causes of action, suits, judgments, settlements, costs or expenses (including but not limited to attorney fees as approved by a court, and responsible investigative, discovery, and court costs,) involving injuries to or death of any person, including injury to Applicant’s employees or damage to property, including but not limited to any property of permittee or City occurring on or about the filming area, and all claims which arise from or are connected with the negligent performance of or failure to perform work or other obligations of this agreement, or are caused by the negligent acts of the City, its Council Members, officers, agents, or employees, except such injury, death or damage as is caused by or arises out of or is in any way connected with the following: City’s sole negligence or willful misconduct, but not from City=s mere comparative or contributory negligence; and all expenses of investigating and defending against same.

____________________
Signature

____________________
Date
NOTICE OF INTENT FOR FILMING

The purpose of this form is to notify adjacent property owners of an application for a filming permit in the City of Piedmont.

Company: ________________________________________________________________
Contact Person: ____________________________________________________________
Telephone No.: _____________________________________________________________
Filming Location: __________________________________________________________
Proposed Dates: ____________________________________________________________
Proposed Hours: ____________________________________________________________
(includes arrival through departure)
Description of Proposed Activities: __________________________________________

Date of This Notice: _________________________________________________________
Delivered By: _________________________ or mailed by ____________________________

signature  signature

This notice will not be followed by a notice from the City. If you have any questions regarding the permit or this notice, please contact the City of Piedmont at 510-420-3050 between the hours of 8:30 am to noon and 1:00 pm to 5:00 pm, Monday through Friday, or by mail at Department of Public Works, City of Piedmont, 120 Vista Avenue, Piedmont CA 94611.
For Staff Use Only

Department Recommendations

Fire Department:

Public Works Department:

Police Department:

Finance Department:

Cost for overtime personnel: ___________

__________________________
Filming Location

__________________________
Date(s) of Filming
APPLICATION IS HEREBY:  

______APPROVED  
______APPROVED WITH CONDITIONS NOTED  
______DENIED  

SPECIAL CONDITIONS:  

______________________________________________________________________________  
______________________________________________________________________________  
______________________________________________________________________________  

________________________________  
City Administrator  

________________________  
Date  

________________________  
Filming Location  

________________________  
Date(s) of Filming