



**City of Camarillo**  
*Department of Community Development*

**SPECIAL EVENT PERMIT – FILMING**  
**Application**

<b>SUBMITTAL</b>	601 Carmen Drive P.O. Box 248 Camarillo, CA 93011-0248 Phone: 805.388.5360	<b>STAFF USE</b>	Fee	SPEV No. _____
			<input type="checkbox"/> \$_____ Administrative approval <input type="checkbox"/> \$_____ City Council approval <input type="checkbox"/> Non-profit exempt <input type="checkbox"/> Deposit \$_____	Received by _____ Date Filed _____ HTE No. _____  Case Planner _____
<b>NOTE</b>	<p><b><u>A Special Event Permit for filming must be filed with the Department of Community Development at least seven (7) days prior to the start of filming. Applications that are incomplete or late will not be accepted.</u></b></p> <p><b><u>Fees must be paid at time of submittal of the application.</u></b></p> <p>Special Event Permits will not be issued for any activity that conflicts with the City of Camarillo Municipal Code, and no person shall operate, conduct or maintain any business or operation which is in conflict with the Camarillo Municipal Code.</p>			
<b>INFORMATION REQUEST</b>	<p><b>Student <input type="checkbox"/> Yes <input type="checkbox"/> No</b></p> <p>APPLICANT/PRODUCTION COMPANY _____</p> <p>Main Contact Person (please print) _____</p> <p>Email (required) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone (8 am – 5 pm) _____ Cell _____ Fax _____</p> <hr/> <p>PERMIT PROCESSING COMPANY (if applicable) _____</p> <p>Contact Person (please print) _____</p> <p>Email (required) _____</p> <p>Address _____</p> <p>City _____ State _____ Zip _____</p> <p>Phone (8 am – 5 pm) _____ Cell _____ Fax _____</p>			
<b>PROPERTY OWNER</b>	<p>If filming will use multiple properties, property owner's authorization is required for all properties at time of submittal. If filming in a residential neighborhood, Homeowner's Association is required in addition to the property owner. Attach additional property owner's authorization as needed.</p> <p><b><i>As legal owner/manager/legal representative of the property, I hereby give my consent and approval of the filing of this Special Event Permit – Filming application.</i></b></p> <p><b><input type="checkbox"/> Property Owner / <input type="checkbox"/> Property Manager / <input type="checkbox"/> Legal Representative</b></p> <p>Signature _____ Date _____</p> <p>(Print Name) _____ Title _____</p> <p>Company / Entity Name _____</p> <p>Email _____ Phone _____</p>			

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## CHECKLIST

**REQUIRED SUBMITTAL ITEMS. All Special Event filming Permit applications must submit the following items. Incomplete applications will not be accepted. Additional materials may be required depending on the nature and location of the request.**

- ☐ Completed Special Event Permit – Filming application
- ☐ Site Plan – 1 copy 8 ½" x 11"
- ☐ Fees per current Fee Schedule – Students are exempt with verification from film school that applicant is an enrollee and that this is a student film project.
- ☐ Certificate of Insurance and Endorsement Sheet (see insurance sample for requirements)
- ☐ Property Owner's Authorization
- ☐ VCFPD Questionnaire for Filming

## LOCATION

**Location #1:** \_\_\_\_\_  
**Date (s):** \_\_\_\_\_ **Time(s):** \_\_\_\_\_  
Private residence ☐ Yes ☐ No // Commercial location ☐ Yes ☐ No // City property ☐ Yes ☐ No  
**Location #2:** \_\_\_\_\_  
**Date (s):** \_\_\_\_\_ **Time(s):** \_\_\_\_\_  
Private residence ☐ Yes ☐ No // Commercial location ☐ Yes ☐ No // City property ☐ Yes ☐ No

## DESCRIPTION OF FILMING ACTIVITY

**Type of filming:** ☐ TV ☐ Motion Picture ☐ Music Video ☐ Still Photography ☐ PSA  
☐ Advertisement ☐ Other \_\_\_\_\_

**Film/show title:** \_\_\_\_\_ **Rating (if applicable):** \_\_\_\_\_

**Film plot (brief):** \_\_\_\_\_

**Indicate all that apply:**

<input type="checkbox"/> Interior dialog	<input type="checkbox"/> Exterior dialog	<input type="checkbox"/> Running/Walking shots
<input type="checkbox"/> Wet down	<input type="checkbox"/> Aircraft	<input type="checkbox"/> Other _____

**Briefly describe the filming activities:** \_\_\_\_\_

**Will filming take place on public streets?** ☐ Yes ☐ No      If yes, please describe below:

<input type="checkbox"/> Road closure	<input type="checkbox"/> Lane Closure	<input type="checkbox"/> Drive up/Away
<input type="checkbox"/> Drive with flow of traffic	<input type="checkbox"/> Running / Walking shots	<input type="checkbox"/> Camera in curb lane

**What street(s)/area(s) will be involved?** \_\_\_\_\_

**Estimated number of crew** \_\_\_\_\_ **Estimated number of talent** \_\_\_\_\_

**Vehicles / Equipment involved. Please mark all that apply and indicate quantity:**

<input type="checkbox"/> Cranes _____	<input type="checkbox"/> Lighting trucks _____	<input type="checkbox"/> Oversized equipment _____
<input type="checkbox"/> Trailers _____	<input type="checkbox"/> Support vehicles _____	<input type="checkbox"/> Other _____ Type _____

**Location of where vehicles will be parked:** \_\_\_\_\_

## DESCRIPTION OF FILMING ACTIVITY (cont.)

Describe noise level \_\_\_\_\_

Will firearms or simulated firearms be used? ☐ Yes ☐ No

If so, in what capacity? \_\_\_\_\_

Will pyrotechnics, explosives, or fire be involved? ☐ Yes ☐ No

If so, in what capacity? \_\_\_\_\_

Will a generator be used? ☐ Yes ☐ No

Location: \_\_\_\_\_

Indicate type and size of generator: \_\_\_\_\_

Will chemicals be used? ☐ Yes ☐ No If yes, describe: \_\_\_\_\_

Will there be stunts? ☐ Yes ☐ No If yes, describe: \_\_\_\_\_

Will animals be used? ☐ Yes ☐ No

Will security be provided? ☐ Yes ☐ No If yes, by whom? \_\_\_\_\_

Will food be provided? ☐ Yes ☐ No If yes, by whom? \_\_\_\_\_

Will a tent be used? ☐ Yes ☐ No If yes, list quantity and size: \_\_\_\_\_

Will there be any building or façade changes? ☐ Yes ☐ No If yes, describe: \_\_\_\_\_

## PARKING RESTRICTIONS

Will reserved parking spaces be required? ☐ Yes ☐ No

If yes, the Applicant/Permittee will be responsible for posting all necessary signage. Parking restrictions must be **posted 72 hours in advance** of the proposed parking restriction, using the standard "R26, No Parking Anytime-Temporary" working with the date(s) and hours handwritten in. City ordinances do not permit the signs to be posted on trees, signposts, streetlights, etc. The signage must be posted on either barricades, delineator cones or posts. The City does not provide signage, barricades, delineator cones or posts. It is the Applicant/Permittee's responsibility to remove all signage at the completion of the approved time period.

Please list location, dates, and times of requested locations of restricted parking. Attach a map.

Location \_\_\_\_\_ Number of spaces \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

Location \_\_\_\_\_ Number of spaces \_\_\_\_\_

Date \_\_\_\_\_ Time \_\_\_\_\_ a.m./p.m. to \_\_\_\_\_ a.m./p.m.

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## ➤ **APPLICANT:**

*I hereby certify the following:*

- *I understand that any violation of any part of the Municipal Code could lead to the closing/cancelling of the event.*
- *I understand that any violation of the conditions of approval could lead to the closing/cancelling of the event.*
- *I will provide proper insurance (Certificate of Insurance and Endorsement Form).*
- *By signing this form, I am stating that I have permission to sign for the applicant/permittee.*

*I further certify that the information included herein is accurate.*

☐ Applicant/Permittee / ☐ Film Permitting Agency / ☐ Legal Representative

Signature \_\_\_\_\_ Date \_\_\_\_\_

(Print Name Here) \_\_\_\_\_ Title \_\_\_\_\_

Staff Comments \_\_\_\_\_

## **COMMUNITY DEVELOPMENT DEPARTMENT Review:**

☐ Approved / ☐ Denied

Signature \_\_\_\_\_ Date \_\_\_\_\_

Assistant Director of Community Development

Signature \_\_\_\_\_ Date \_\_\_\_\_

Director of Community Development