



Community Development Department
16400 Colorado Avenue
Paramount, CA 90723-5050
(562) 220-2036

Application for Filming Permit

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

1. Person in charge of filing activity.

Name: _____

Address: _____

Telephone No.: _____

Name and address of employer: _____

2. Address/location where filming is to be conducted.

3. Property Owner's Name: _____

Property Owner's Address: _____

Property Owner's Telephone No.: _____

Property Owner's Email Address: _____

(Please provide owner's written permission, consent and/or lease for use of property.)

4. Hours and dates such activity will transpire:

5. Describe the character or nature of the proposed filming activity. Additional pages may be attached.

6. The number of personnel to be involved. _____

7. Describe the use of any animals or pyrotechnics. Additional pages may be attached.

8. Describe the exact amount and type of vehicles and equipment to be involved. Additional pages may be attached.

9. Describe what, if any, city services are desired or required on location during filming for the purpose of assisting the production. Additional pages may be attached.

I have read Chapter 11E of the Paramount Municipal Code pertaining to Filming Permits and agree to comply with the provisions therein. I understand that failure to comply with the rules, regulations, and conditions of the permit may result in the cancellation of the permit without prior notice or hearing.

Applicant's Signature

Date

_____ Application

_____ Owner's Consent

_____ Certificate of Liability Insurance

_____ Workers' Compensation Insurance

_____ Hold Harmless Agreement

_____ Faithful Performance Security Deposit, if Applicable (Minimum \$2,500)

_____ Fire Department Approval

Approved by Community Development
Director or his/her designee

Date

Denied by Community Development
Director or his/her designee

Date