

PERMIT NO: \_\_\_\_\_

DATE: \_\_\_\_\_

**TOWN OF TUXEDO  
APPLICATION FOR FILMING PERMIT**

**A. Applicant Name:** \_\_\_\_\_

Address: \_\_\_\_\_

Contact Name(s): \_\_\_\_\_

DAYTIME PHONE NO: (    ) \_\_\_\_\_ EVENING PHONE NO: (    ) \_\_\_\_\_

**B. LOCATION(S)** List the location or locations of filming and date or dates when filming will take place:

<u>DATE</u>	<u>E X A C T</u>	<u>A D D R E S S</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

**C. VEHICLE(S), EQUIPMENT AND OTHER APPARATUS** Describe vehicles, including license plate numbers, equipment and other apparatus proposed to be operated. (Attach separate pages if more space is needed):

Vehicles:

Year	Make	Model	Color	Registration No.	Vehicle I.D. No.
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____

Equipment and Apparatus:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**D. PRODUCTION SCHEDULE** List production schedule, including a description of all dangerous activities and use of explosives (Attach separate pages if more space is needed):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*CONTINUED ON REVERSE*

**E. POLICE SERVICES REQUESTED:** (✓ One): ☐ YES ☐ NO

**F. NOTIFICATION** A copy of this application has been provided to the below-listed individuals by mailing the same in a sealed envelope, with postage prepaid thereon, in a post office or official depository of the United States Postal Service on \_\_\_\_\_:  
[Insert date]

**G. INDEMNIFICATION STATEMENT:** By signing below, the applicant hereunder agrees to defend, indemnify and hold harmless the Town of Tuxedo, its agents, servants and employees, from any and all claims, causes of action, liability, losses or damages which may arise out of, and for the payment of all damages for bodily injury or property damage which may be caused to any person by reason of, the filming operations performed under this permit or from any acts or omissions of the permit holder, its agents, employees, contractors or subcontractors.

**H. ATTACH PROOF OF INSURANCE IN MINIMUM AMOUNT OF TEN MILLION DOLLARS (\$10,000,000) COMBINED SINGLE LIMIT GENERAL LIABILITY COVERAGE AND ONE MILLION DOLLARS (\$1,000,000) COMBINED SINGLE LIMIT AUTOMOBILE LIABILITY COVERAGE, NAMING TOWN OF TUXEDO AS AN ADDITIONAL INSURED.**

**I. ATTACH PROOF OF WORKERS' COMPENSATION AND DISABILITY INSURANCE AS REQUIRED BY NEW YORK STATE.**

**J. SCHEDULE OF FEES:** [✓ Fee(s) Submitted with Application]:

(1) Non-refundable Application Fee:

- ☐ \$ 250.00 for applications received 5 business days in advance of filming
- ☐ \$ 350.00 for applications received 4 business days in advance of filming
- ☐ \$ 550.00 for applications received 3 business days in advance of filming
- ☐ \$ 750.00 for applications received 2 business days in advance of filming
- ☐ \$1,000.00 for applications received 1 business day in advance of filming

(2) Filming permit: ☐ on private property \$500.00, *plus* cost of police services  
☐ on public land \$250.00 per hour (minimum four hours), *plus* cost of police services  
☐ for non-profit applicants \$ 50.00

(3) ☐ \$5,000.00 Refundable Security Deposit - Mandatory/Application will NOT be Considered until Submitted

State of New York )  
County of Orange ) ss:

\_\_\_\_\_, being duly sworn, deposes and says that the information contained in the foregoing application is true and correct, under the penalty of perjury.

\_\_\_\_\_  
Signature of Applicant

SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY  
OF \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Notary Public

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**FOR OFFICE USE ONLY**

APPROVED BY TOWN BOARD By Resolution Dated: \_\_\_\_\_ Police Chief Initials if Item E checked "Yes" \_\_\_\_\_

TOWN CLERK: PERMIT FEE: \$ \_\_\_\_\_ DATE PAID: \_\_\_\_\_ ☐ CASH ☐ CHECK # \_\_\_\_\_

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