

City of Coral Gables Community Recreation FILM AND PHOTOGRAPHY PERMIT

PERMIT #:	

Today's date: _____

	Legal name of the permit applicant (company or individual): _ Contact Person for this permit application:			Email:	
	Permit application address:				
	Permit applicant phone:				
	Is the Contact Person an officer of the legal entity?				
	Is the contact person an authorized agent of the applicant?	•	No If Yes, Contact Person (a		·
	with a limited power of attorney evidencing that they are auth agreement must be executed (signed) by an officer or author	orized to execute	legally binding contracts on beha	• ,	,
	Client:				
	Please provide a map or picture of location site for clear iden	tification.			
	Location 1 (Name and address):				
	Film dates:	No. of days:	Hours: Start	End	
	Location 2 (Name and address):				
	Film dates:	No. of days:	Hours: Start	End	
	Location 3 (Name and address):				
	Film dates:	No. of days:	Hours: Start	End	
	Production type: ☐ Still ☐ Motion Picture/Video ☐	1 Film □ Mai	or motion picture		
	•	•	·	□ Decidential	Chudant nucia
J.	Classification: ☐ Commercial ☐ Industrial ☐ TV ☐ Student project ☐ Other	☐ Multimedia	☐ Documentary ☐ Feature		☐ Student proje
1.	Total personnel: Est. expenditures: \$				
2.	Total vehicles/equip:				
	Generators Cars	Trucks	Catering vehicle	Vans	Other
3.	Insurance carrier:				
	Description:				
	Parking requirements:				
4.	Parking requirements: Special Effects:				
4.	Parking requirements: No; If so, please list all that a				
4.					
4.		apply	TION:		

The Permit Applicant jointly and severally, hereby hold harmless, indemnify and defend the City of Coral Gables, its representatives, officers, agents, affiliates, employees, the administration and elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts or omissions on the part of the Permit Applicant or any of the participants of the Event outlined in this application. This indemnification provision shall survive the termination of this contract and shall be in full force and effect beyond the term or termination of this contract, however, terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under section 440.11, Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the City may have under the doctrine of sovereign immunity of section §768.28, Florida Statutes.

Permittee agrees to all the terms and conditions of this permit, including provisions on the reverse side of this form and any attachments; agrees to obtain prior City approval for deviations from the information provided herein; and understands that failure to comply with these requirements may result in the immediate cancellation of production.

Weather Note: Renewable without fee, if weather conditions are unfavorable for shooting.

Applicant/Title	Date
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Coral Gables Community Recreation 405 University Drive, Coral Gables, FL 33134 305-460-5607

specialevents@coralgables.com
Visit us on the web at www.gablesrecreation.com

NOTES:

OFF	FICE USE ONLY
OFF	ICE USE UNLY
Date received:	Date Permitted:
Parking meter numbers: #	##
Have business owners and/or residence been notified?	
	ring □ Maint. Services □ Risk Management □ Film liaison
PHOTO FEES: \$	
001-329-830	APPROVED DATE
TOTAL FEES: \$	
Type of permit:	APPLICATION COMPLETION CHECKLIST:
☐ A. Public property-still photography	☐ Film and Photography Permit
☐ B. Public property-motion picture/video	☐ Certificate of Insurance (COI)
☐ C. Residential- large still/commercial/video	☐ Site Diagram (Showing Film and Parking Areas)
☐ D. Residential-major motion picture	☐ HOA Approval
	☐ Homeowners Approval
	□ Neighborhood Notification Letter
	☐ Neighborhood (Hours: Start) Approval

THIS COVER SHEET MUST BE PROVIDED WITH ALL INSURANCE DOCUMENTS

5. SPECIAL EVENTS PERMIT COVER SHEET FOR EVIDENCING INSURANCE TO THE CITY OF CORAL GABLES

Legal Name of Permit Applicant (Individual or Company):	
Insurance is being submitted for an ongoing Special Event (check one):	YES or 🗆 NO
Insurance is being submitted for one Special Event permit (check one):	🗆 YES or 🗆 NO
Will liquor be served at the Special Event (check one):	🗆 YES or 🗆 NO

Without limiting PERMIT APPLICANT'S indemnification of the CITY, and during the term of this Agreement, PERMIT APPLICANT shall provide and maintain at its own expense the below described programs of insurance. Such programs and evidence of insurance shall be satisfactory to the CITY and shall be primary to and not contributing with any other insurance or self-insurance program maintained by the CITY. Certificates or other evidence of coverage shall be delivered via email, fax or US mail to;

Such certificates or other evidence of coverage shall be delivered prior to commencing performance under this Permit, and shall contain the express condition that the CITY is to be given written notice of at least thirty (30) days in advance of any cancellation, non-renewal or material change of any insurance policy.

Certificate Holder should read: City of Coral Gables Insurance Compliance P.O. Box 100085 - CE Duluth, GA 30096

Email address: cityofcoralgables@ebix.com

6. INSURANCE REQUIREMENTS FOR COMPANIES

Companies are required to evidence the following Insurance to the City;

<u>Insurance Coverage Type</u> <u>Limit of Liability Required</u>

Commercial General Liability Each Occurrence \$1,000,000 Aggregate \$2,000,000 Liquor Liability (required if liquor is served) Each Occurrence \$1,000,000 Aggregate \$2,000,000

- All insurance policies evidenced to the City shall name the City of Coral Gables as an Additional Insured on a Primary and Non-contributory basis.
- All insurance policies evidenced to the City shall contain A Waiver of Subrogation Endorsement in favor of the City of Coral Gables.
- All insurance companies providing coverage must have an A.M. Best rating of at least (A-/VI) or an equivalent rating given by a recognized rating agency.

Companies evidencing insurance must provide the following documents to the City;

- 1. This Cover Sheet with all of the questions above answered.
- 2. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured on a primary and non-contributory basis including a Waiver of Subrogation in favor of the City.
- 3. A copy of the Endorsements evidencing that Additional Insured status has been provided to the City and that this coverage has been provided on a Primary & Non-Contributory Basis.
- 4. A copy of the all Waiver of Subrogation Endorsements for each line of coverage required.

7. INSURANCE REQUIREMENTS FOR INDIVIDUALS

Individuals are required to evidence the following Insurance to the City;

<u>Insurance Coverage Type</u>

Personal Liability Insurance

<u>Limit of Liability Required</u>

Each Occurrence \$300,000

(including host liquor liability coverage is if liquor is served)

Individuals evidencing insurance must provide the following documents to the City;

- 1. This Cover Sheet with all of the questions above answered.
- 2. A Certificate of Liability Insurance naming the City of Coral Gables as an additional insured.

8. IF APPLICANT DOES NOT HAVE INSURANCE

Alternatively, Companies & Individuals may obtain liability insurance through a TULIP (Tenant User Liability Insurance Program) established by the City @ www.ebi-ins.com/tulip.

The City of Coral Gables reserves the right to require additional types of insurance coverage or higher limits of liability for any event. This determination will be made by the Risk Management Division.

City of Coral Gables Insurance Compliance Contact Information

Phone: (951) 652-2883 • Fax: (770) 325-0417 • Email: cityofcoralgables@ebix.com