



A Film Permit is required when filming for commercial, non-profit, or student purposes, including still photography, on public or private property within the City of Irvine. Activities that generally do not require a Film Permit include news media, family video/photos for private use, or filming entirely within a dedicated film studio (no animals involved).

A \$92 (non-refundable) application fee will be charged upon receipt of the application. A Film Permit requires a City business license (\$51 maximum fee) and a Commercial General Liability Certificate insurance. Student film activities may be exempt from the business license requirement with valid proof of enrollment. Insurance requirements may be waived if activities are conducted completely on private property. Based on your project, other City permits may be required such as Public Facility or Animal Services permits (see Section C below for additional contact information).

Submit your Film Permit Application at least three days prior to your expected film date. However, major filming productions or filming within a public park may require up to three weeks to review. Please use the information below as a checklist to assemble the materials required for your Film Permit. Applications can be mailed to: City of Irvine, Attn: Film Permits, P.O. Box 19575, Irvine, CA 92623-9575.

## SUBMITTAL REQUIREMENTS

### SECTION A: REQUIRED DOCUMENTS

- Special Event/Film Permit Application Fee form
- Film Permit Application, including Idemnification Agreement
- [City Business License Application](#)
- Evidence of comprehensive general liability insurance with a minimum limit of \$1,000,000 **naming the City of Irvine as additional insured** and **a General Liability Endorsement** (required if filming occurs on public property); see attached sample insurance certificate.

### SECTION B: CHECK PAYABLE TO THE CITY OF IRVINE

- Business License fee is required prior to the issuance of a Film Permit
- Community Services fee, if applicable

### SECTION C: ADDITIONAL INFORMATION

Based on your specific filming activities, one or more City Departments may need to review your Film Permit. Please specify in you Film Permit Application if your project involves any of the following:

- Aerial Work (Airplane/Helicopter)
- Animals
- Car Scenes
- Fighting
- Pyrotechnics/Explosives
- Site Security
- Traffic Control Measures
- Use of Large Tents/Stages
- Use of Temporary Electrical Hook-ups
- Weapons or Weapon-like Paraphernalia

# FILM PERMIT

---


If you are planning to use public facilities (such as parks, athletic fields, community centers, or picnic shelters) a Community Services Public Facility Permit will be required. For more information on what public facilities are available, how to apply, or to speak with a Community Services representative, visit [cityofirvine.org/parks](http://cityofirvine.org/parks) or call 949-724-6620.

For more information on obtaining a Business License, contact 949-724-6310 or visit [cityofirvine.org/business](http://cityofirvine.org/business).

Some areas of the City may require non-City permits or permission. These areas include: University of California, Irvine Valley College, Irvine Unified School District, Orange County Parks (Irvine Regional Park, William Mason Regional Park) or Orange County Libraries (University Park Library, Heritage Park Library, and Katie Wheeler Library). Please email [PSSpecialEvents@cityofirvine.org](mailto:PSSpecialEvents@cityofirvine.org) for additional information.

## CERTIFICATE OF INSURANCE SAMPLE

Please note that failure to provide a Certificate of Insurance and Policy Endorsement amounts to a violation of City ordinance, and may be grounds for the denial of your Film Permit Application.

<b>CERTIFICATE OF INSURANCE</b>		<b>005550</b>	DATE (MM/DD/YY) 07/03/2002	
PRODUCER:  <b>UNIFORM INSURANCE COMPANY</b> P.O. Box 12345 Any city, Any state 12345-6789		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND, OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. <b>COMPANIES PROVIDING COVERAGE</b>		
INSURED:		COMPANY A		
		COMPANY B		
		COMPANY C		
		COMPANY D		
COVERAGES: THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN TO ALL THE TERMS, EXCLUSIONS, AND CONDITIONS OF BOTH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.				
TYPE OF INSURANCE	POLICY NUMBER	POLICY DATE (MM/DD/YY)	EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNER & CCNT PROT <input type="checkbox"/> LIABILITY ARISING OUT OF ATHLETIC PARTICIPATION	ABC 1234 567	07/03/2002	07/03/2003	\$ 1,000,000 NET NETS COMP OF AGG \$ 1,000,000 PERSONAL & ADV INJURY \$ 1,000,000 EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE \$ 50,000 MEDICAL \$ 5,000
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> RENTED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per inc) \$ PROPERTY DAMAGE \$
DAMAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY \$ EACH ACCIDENT \$ AGGREGATE \$
EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	ABC1234	07/03/2002	07/03/2003	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
WORKER'S COMPENSATION EMPLOYERS' LIABILITY				<input type="checkbox"/> STATUTORY LIMITS EACH ACCIDENT \$ DISEASE - POLICY LIMIT \$ DISEASE - EACH EMPLOYEE \$
OTHER				
POSITION OF OPERATIONS/LOCATIONS/SPECIAL ITEMS EVENT: IRVINE MARATHON		DATE: 07/03/2002	SANC: #1234	
<b>Certificate holder is the same as the policyholder. All insured for this sanctioned event</b>				
CERTIFICATE HOLDER  <b>CITY OF IRVINE AND ITS OFFICERS,                  EMPLOYEES, AGENTS, VOLUNTEERS, AND                  REPRESENTATIVES</b> ONE CIVIC CENTER PLAZA P.O. BOX 19575 IRVINE, CALIFORNIA 92623-9575		CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES AS CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT  AUTHORIZED REPRESENTATIVE  <b>UNIFORM INSURANCE COMPANY</b>		

**ADDITIONAL INSURED POLICY ENDORSEMENT SAMPLE**

Please note that failure to provide a Certificate of Insurance and Policy Endorsement amounts to a violation of City ordinance, and may be grounds for the denial of your Film Permit Application.

**INSURANCE SERVICES OFFICE, INC.  
P.O. BOX 12345  
Any City, Any State 12345-6789  
(555) 555-5555**

POLICY NUMBER: **12345-67890**  
GENERAL LIABILITY

COMMERCIAL

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - DESIGNATED PERSON OR ORGANIZATION**

This endorsement modifies insurance provided under the following:

**COMMERCIAL GENERAL LIABILITY COVERAGE PART**

**SCHEDULE**

Name of Person or Organization:

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

WHO IS INSURED (Section D) is amended to include as an insured the person or organization shown in the schedule as an insured but only with respect to liability arising out of your operations or premises owned by or rented to you.

CG 20 26 11 85

Page 1 of 1

Copyright, Insurance Services Office, Inc., 1984



# SPECIAL EVENT/FILM PERMIT APPLICATION FEES

## APPLICANT INFORMATION

APPLICANT NAME		COMPANY NAME	
ADDRESS		PHONE	
CITY	STATE	ZIP	EMAIL

## EVENT INFORMATION

EVENT NAME	EVENT DATE
EVENT DESCRIPTION	
ACTUAL EVENT LOCATION(S)	

### FOR PS USE ONLY

REQUESTOR: \_\_\_\_\_ DATE: \_\_\_\_\_  
DEPARTMENT: \_\_\_\_\_

DESCRIPTION/EXPLANATION OF CHARGES:

SPECIAL EVENT PERMITS	FILM PERMITS
SPECIAL EVENT PERMIT APPLICATION FEE (\$150)	FILE PERMIT APPLICATION FEE (\$92)
EXPEDITED PROCESSING FEE (\$10/day)	EXPEDITED PROCESSING FEE (\$10/day)
BUSINESS LICENSING FEE	BUSINESS LICENSING FEE
VENDOR FEES	VENDOR FEES
<b>TOTAL:</b>	<b>TOTAL:</b>

INVOICE DISTRIBUTION:  MAIL TO CUSTOMER  OTHER; PLEASE EXPLAIN: \_\_\_\_\_  
 EMAIL TO CUSTOMER

### FOR FM USE ONLY

ACCOUNT#: \_\_\_\_\_ ENTERED DATE: \_\_\_\_\_ CUST#: \_\_\_\_\_  
INVOICE#: \_\_\_\_\_ DIV CODE: \_\_\_\_\_



# FILM PERMIT APPLICATION



MICHAEL KENT  
CHIEF OF POLICE

DATE

## APPLICANT INFORMATION

APPLICANT NAME			CONTACT NAME
ADDRESS			PHONE
CITY	STATE	ZIP	EMAIL

## PROJECT INFORMATION

PRODUCTION TITLE	
ACTIVITY	
PROPOSED FILMING DATE(S)	LOCATION(S)
PROPOSED FILMING TIME(S)	
TOTAL NUMBER OF DAYS	

### FOR CITY USE ONLY

#### CLEARANCES

AGENCY/DEPT	REQ	CLEARED BY	DATE
ALCOHOLIC BEVERAGE CONTROL	<input type="checkbox"/>		
ANIMAL SERVICES	<input type="checkbox"/>		
BUILDING & SAFETY	<input type="checkbox"/>		
IRWD	<input type="checkbox"/>		
COMMUNITY SERVICES	<input type="checkbox"/>		
OCFA	<input type="checkbox"/>		
OC GREAT PARK	<input type="checkbox"/>		
ORANGE COUNTY HEALTH DEPT	<input type="checkbox"/>		
ORANGE COUNTY TRANSIT DIST	<input type="checkbox"/>		
PUBLIC SAFETY	<input type="checkbox"/>		
PUBLIC WORKS	<input type="checkbox"/>		
REGULATORY AFFAIRS (PS)	<input type="checkbox"/>		
RISK MANAGEMENT	<input type="checkbox"/>		
TRANSPORTATION SERVICES	<input type="checkbox"/>		
ZONING (CD)	<input type="checkbox"/>		

#### REQUIRED INSPECTIONS

INSPECTION TYPE	REQ	CLEARED BY	DATE
ANIMAL SERVICES	<input type="checkbox"/>		
BUILDING/STRUCTURAL	<input type="checkbox"/>		
ELECTRICAL	<input type="checkbox"/>		
MECHANICAL	<input type="checkbox"/>		
OCCUPANCY	<input type="checkbox"/>		
OCFA	<input type="checkbox"/>		
OFFSITE GRADING/CONSTRUCTION	<input type="checkbox"/>		
ORANGE COUNTY HEALTH DEPT	<input type="checkbox"/>		
PLUMBING	<input type="checkbox"/>		
SPECIAL REQUIREMENTS	<input type="checkbox"/>		
<b>APPROVAL TO FILM?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO			
SIGNATURE		DATE	
SPECIAL EVENTS COORDINATOR NAME			

# FILM PERMIT APPLICATION

## ITEM CHECKLIST

PLEASE CHECK AND PROVIDE A BRIEF DESCRIPTION OF EACH ITEM THAT WILL BE HOSTED AT YOUR EVENT

ITEM	YES/NO	BRIEF DESCRIPTION
ALCOHOLIC BEVERAGES	<input type="checkbox"/> Y <input type="checkbox"/> N	
ANIMALS	<input type="checkbox"/> Y <input type="checkbox"/> N	
AUTOMOBILES/TRUCKS	<input type="checkbox"/> Y <input type="checkbox"/> N	
BICYCLES/FOOT RACES	<input type="checkbox"/> Y <input type="checkbox"/> N	
BLOCK PARTY	<input type="checkbox"/> Y <input type="checkbox"/> N	
BUILDINGS/STRUCTURES	<input type="checkbox"/> Y <input type="checkbox"/> N	
CAMPGROUNDS/RV AREAS	<input type="checkbox"/> Y <input type="checkbox"/> N	
CITY PROPERTY OR FACILITY USED	<input type="checkbox"/> Y <input type="checkbox"/> N	
CONCESSIONS	<input type="checkbox"/> Y <input type="checkbox"/> N	
DANCE/PARTY/CONCERT	<input type="checkbox"/> Y <input type="checkbox"/> N	
ELECTRICAL/MECHANICAL/PLUMBING	<input type="checkbox"/> Y <input type="checkbox"/> N	
EMERGENCY ACCESS REQUIRED	<input type="checkbox"/> Y <input type="checkbox"/> N	
FILM PRODUCTION	<input type="checkbox"/> Y <input type="checkbox"/> N	
FLAMMABLE MATERIALS	<input type="checkbox"/> Y <input type="checkbox"/> N	
FOOD SUPPLIES/SALES	<input type="checkbox"/> Y <input type="checkbox"/> N	
LIGHTING/ILLUMINATION	<input type="checkbox"/> Y <input type="checkbox"/> N	
MEDICAL/FIRST AID STATIONS	<input type="checkbox"/> Y <input type="checkbox"/> N	
ONSITE GRADING/CONSTRUCTION	<input type="checkbox"/> Y <input type="checkbox"/> N	
PARKING	<input type="checkbox"/> Y <input type="checkbox"/> N	
POLICE/SECURITY PROTECTION	<input type="checkbox"/> Y <input type="checkbox"/> N	
PYROTECHNICS (FIREWORKS)	<input type="checkbox"/> Y <input type="checkbox"/> N	
RIDES	<input type="checkbox"/> Y <input type="checkbox"/> N	
SANITATION	<input type="checkbox"/> Y <input type="checkbox"/> N	
SIGNS/BANNERS/BALLOONS	<input type="checkbox"/> Y <input type="checkbox"/> N	
STREET/LANE CLOSURES	<input type="checkbox"/> Y <input type="checkbox"/> N	
TENTS	<input type="checkbox"/> Y <input type="checkbox"/> N	
WATER SUPPLY USED OR AFFECTED	<input type="checkbox"/> Y <input type="checkbox"/> N	

# FILM PERMIT APPLICATION

## INDEMNIFICATION AGREEMENT

I, \_\_\_\_\_ (hereinafter called the "Applicant") agree to indemnify the City of Irvine (hereinafter called the "City"), its officers, and employees, against and will hold and save them and each of them harmless from and all action, claims, damages to persons, property, penalties, obligations, or liabilities that may be asserted or claimed by any person, firm, entity, corporation, political subdivision, or other organization arising out of the willful or negligent acts, errors, or omission of the applicant, its agents, employees, subcontractors, or invitees.

- A. The Applicant will pay all costs and expenses incurred in connection with any of the said claims, damages, penalties, or obligations or liabilities, including attorney's fees incurred in connection therewith.
  
- B. The Applicant will promptly pay any judgement rendered against the City, its officers, or employees for any said claims, damages, penalties, or obligations or liabilities; and the Applicant agrees to save and hold the City, its officers, and employees harmless therefrom.
  
- C. In the event the City, its officers, or employees is made a party to any action or proceeding filed or prosecuted against the Applicant for said claims, damages, penalties, or obligations or liabilities, the Applicant agrees to pay to the City, its officers, or employees, any and all costs and expenses incurred by the City, its officers, or employees in such action or proceeding, including but not limited to reasonable attorney's fees.
  
- D. The Applicant shall maintain a Commercial General Liability Policy with limits of liability not less than \$1,000,000 per occurrence and the policy shall be endorsed to name the City of Irvine and its employees, representatives, officers, and agents (collectively hereinafter the "City and City Personnel") as additional insured. This insurance is primary and non-contributing with any other valid and collectible insurance or self-insurance available to the City.

Fully executed this \_\_\_\_\_ day of \_\_\_\_\_ in the year of \_\_\_\_\_, by:

\_\_\_\_\_  
SIGNATURE

\_\_\_\_\_  
PRINT NAME

\_\_\_\_\_  
TITLE

\_\_\_\_\_  
DATE



# FILM PERMIT APPLICATION

## BUSINESS LICENSE REQUIREMENTS

One of the key elements of any successful event is making sure your event complies with all City and State regulations. The City of Irvine's Municipal Code, Section 4-6-207, states any person (or entity) who wishes to conduct business activity in Irvine must first obtain a City business license. The following information is provided to assist you with complying with the business license requirement.

**Promoter** - The promoter is the person(s) who(m) organizes the event. The promoter must have a City of Irvine business license. If the promoter does not have a current and valid business license, a new application and payment must be submitted immediately. Applications can be downloaded from the City's website at [cityofirvine.org](http://cityofirvine.org) or obtained at the Irvine Police Department.

**Contracted Businesses** - Any business, located in Irvine or in another city, who is involved with the event by providing a service (DJ, porta potty, caterer, tent rental/set up, security company, etc.) must have a current City of Irvine business license. If the business is already licensed by the City, please provide the business license number to the promoter. Any business that does not have a current license must submit a new application and payment prior to the event.

**How to Comply** - It is the promoter's responsibility to collect and submit vendor information to Regulatory Affairs. When submitting contracted business and event vendor information, include a business name, business address, business phone number, contact name, and business description (please use the provided, Contracted Business and Event Vendor Information form). Regulatory Affairs staff will verify and calculate vendor fees and notify you, as soon as possible, regarding the appropriate amount due.

If at any time during the Film Permit Application process you have a question pertaining to business licensing, please contact Regulatory Affairs at 949-724-7128.

