

## LOCATION PERMIT FOR VIDEO, FILM OR STILL PHOTOGRAPH

Dear Filming Applicant:

Thank you for your interest in the Town of Fairfield for your commercial filming venture!

Please review this application carefully and completely and accurately fill out all portions of this application which will pertain to your project. Upon receipt of your completed application, proof of insurance and permit fee, a signed approval letter will be sent to you from this office which we require you to keep with you at all times while you are filming in Fairfield. Please feel free to call us at (203) 256-3030 if you should have any questions or need any assistance.

Producer: \_\_\_\_\_

Production Company: \_\_\_\_\_

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

\_\_\_\_\_

\_\_\_\_\_

Phone: \_\_\_\_\_

FAX: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Other Contact: \_\_\_\_\_

Production Manager: \_\_\_\_\_

Director: \_\_\_\_\_

Project Title: \_\_\_\_\_

Start Date: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

External night lighting \_\_\_\_\_

**Format:** Film/Video \_\_\_\_\_

Still Photography \_\_\_\_\_

**Type of Production:** Feature \_\_\_\_\_ Commercial \_\_\_\_\_ TV \_\_\_\_\_

Non-Broadcast \_\_\_\_\_ Other \_\_\_\_\_

Total Cast/Crew for EACH day of production: \_\_\_\_\_  
Large Trucks \_\_\_\_\_ Camera Cars \_\_\_\_\_ Motor Homes \_\_\_\_\_ Generator \_\_\_\_\_  
Cars \_\_\_\_\_  
Other Vehicles or Equipment (describe) \_\_\_\_\_  
\_\_\_\_\_

Animals: \_\_\_\_\_  
Pyrotechnics: \_\_\_\_\_ Effects Permit # \_\_\_\_\_  
Fire Marshal's Approval: \_\_\_\_\_

**LOCATION INFORMATION**

(attach additional pages if necessary)

Exact name/address of filming location: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Filming description (please be specific):

Street closure necessary (please describe): \_\_\_\_\_

**INSURANCE**

(mandatory-certificate of insurance is also required)

Insurance Company: \_\_\_\_\_

Policy # / Expiration Date: \_\_\_\_\_

Certificate Attached: \_\_\_\_\_

YOU MUST NAME PERMITTOR AS LOSS PAYEE

Permittee state the above information is complete and accurate. Producer has read and understands the Terms and Conditions and agrees to comply with the provisions of this permit.

PRODUCER/PRODUCTION COMPANY

PERMITTOR

\_\_\_\_\_  
Company Name

\_\_\_\_\_

\_\_\_\_\_  
By

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

**OFFICE USE ONLY**

Police Department Approval: \_\_\_\_\_

Fire Department Approval: \_\_\_\_\_

Recreation Department Approval: \_\_\_\_\_

Public Works Department Approval: \_\_\_\_\_

Board of Education Approval: \_\_\_\_\_