

PO Box 1390, 100 Jensen Avenue East
Parksville BC V9P 2H3
Phone: 250 954-4666 Fax: 250 248-6650

FILMING PERMIT FEES

Application Fees

The Application Fees relate to the approvals and permits required to film in Parksville. A full list of requirements is located under [Filming Guidelines](#).

Film Permits

Filming Permit - Primary Location	\$200.00
Additional Locations	\$100.00 per location

Parking

City Block	\$250.00 / side /day
City Lot	\$500.00 / day

Parks

Major	\$500.00 / day
Neighbourhood	\$300.00 / day
Photography	Simple: \$70.00 / day Complex: \$160.00/day

Fire Department

Pumper & Staff	\$450.00 (min. call out is four hours)
Ladder Truck, Additional equipment & Staff	\$600.00 (min. call out is four hours)

Operations

Equipment & staff	To be negotiated (min. call out is four hours)
Fire Hydrants	To be negotiated – based on usage and location

*GST will be added to all services.

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FILMING PERMIT - CHECKLIST AND PERMIT APPROVAL

CHECKLIST:

- Site meeting with Filming Company representative(s)
- Completed and signed Filming Permit Application
- Completed and signed Terms and Conditions
- Completed and signed Indemnification Agreement
- Proof of acquisition of Business Licence
- Proof of adequate Liability Insurance
- Proof of WorkSafe BC coverage for workers, contractors, volunteers
- Security Deposit

The applicant agrees that if permission to film is granted pursuant to this application it will abide by the City of Parksville Filming Policy and City of Parksville Bylaws in matters related to the exercise of the permission so granted.

The applicant also agrees to pay any legal costs that may be incurred by the City of Parksville in connection with any amendments to the City of Parksville requirements, proposed by the applicant.

Dated at _____ B.C. this ____ day of _____, 20____

Name of Production Company: _____

Per: _____
Authorized Signatory – Print Name and Title and sign

This portion to be completed by City of Parksville

Authorized Filming Permit:

Dated at _____ B.C. this ____ day of _____, 20____

Approval: Yes No

Per: _____
Authorized Signatory – Print Name and Title and sign



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FILMING PERMIT

Date: _____ Production Title: _____

1. Company: _____ Production Contact: _____

2. Address: _____ Tel.No/FaxNo.: _____

3. Location Manager: _____ Tel: _____ E-mail: _____

Production Manager: _____ Tel: _____ E-mail: _____

4. If TV Commercial name product: _____

5. City Employees Required - Please specify on attached. Anticipated Budget \$ _____

6. Location(s) - Specify on Location Worksheet (over)

7. TYPE OF PRODUCTION

- | | | |
|--|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Feature | <input type="checkbox"/> TV Pilot | <input type="checkbox"/> Video |
| <input type="checkbox"/> Movie of the Week | <input type="checkbox"/> Documentary | <input type="checkbox"/> Short |
| <input type="checkbox"/> TV Series | <input type="checkbox"/> Animation | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Mini Series | <input type="checkbox"/> Photo | <input type="checkbox"/> Other |

8. PROPOSED LOCATION (Address): _____

- | | | |
|---|--|---|
| <input type="checkbox"/> Street Occupancy | <input type="checkbox"/> Private Property | <input type="checkbox"/> Municipal Park |
| <input type="checkbox"/> Studio | <input type="checkbox"/> Commercial Property | <input type="checkbox"/> Municipal Property |

9. PROPOSED ACTIVITIES

- | | | |
|---|--|--|
| <input type="checkbox"/> Gun Fire | <input type="checkbox"/> Drive By | <input type="checkbox"/> Wet Down |
| <input type="checkbox"/> Fire | <input type="checkbox"/> Helicopter/aircraft/boats | <input type="checkbox"/> Stunt |
| <input type="checkbox"/> Rain or Snow | <input type="checkbox"/> Tow Shot | <input type="checkbox"/> Animal |
| <input type="checkbox"/> Explosion/Loud Noise | <input type="checkbox"/> Car Stunt | <input type="checkbox"/> Exterior Set Construction |

10. SCHEDULE (Time & Dates)

Prep:	From _____	To _____	Total No. of Days _____
Shoot:	From _____	To _____	Total No. of Days _____
Wrap:	From _____	To _____	Total No. of Days _____

11. PARKING REQUIREMENTS (Include copy of map)

- On-street: _____ (ft.) Private Parking Lot Municipal Parking Lot

12. BUSINESS LICENCE

The Out of Town Business Licence application (Attached) must be completed and submitted to the City of Parksville Community Planning Department for approval.

Name/Title Signature of Authorized Representative Date

**TERMS AND CONDITIONS FOR USE OF CITY
OF PARKSVILLE PROPERTIES AND FACILITIES**

1. Ensure the site/route is not used for any other purpose than that stated in the Filming Permit and provide all of the necessary traffic controls, parking and emergency access acceptable to the City;
2. No construction, erection or attachment of any device, fixture or other things of whatsoever nature without the prior written consent of the City. This includes nailing or hanging anything from boulevard trees, planters etc.
3. Maintain and, if required, refurbish all municipal property and infrastructure to an equal or better condition than that which existed prior to the filming activity.
4. Ensure collection of litter from the site/s, arranging with a waste disposal company for removal/dumping of bins following the activity;
5. Make arrangements for installation of portable toilets, in quantity suitable to the expected attendance, for the duration of the filming activity;
6. Submit for authorization all filming schedule or activity changes at least 24 hours prior to the commencement of such schedule or activity changes.
7. Agree to indemnify and save harmless the City in respect of any and all claims, demands, suits and costs arising out of any act or omission of the applicant or of any servant, agent or officer of the applicant arising out of or resulting from the use of the site/route by the applicant (Page 5).
8. Obtain and maintain during the term of this event, a comprehensive general liability insurance policy providing coverage of not less than \$5,000,000.00, naming the City of Parksville as an additional insured. A copy of the policy shall be delivered to the City prior to the commencement of filming;
9. Be responsible for the health and safety of the production company's employees, agents, contractors and volunteers and ensure Workers' Compensation coverage is provided for its employees, agents and contractors.
10. Adhere to any additional specific conditions and comments included in the approved Film Permit.
11. Approval for use of private property is the sole responsibility of the applicant.

Printed Name of Authorized Representative

Signature

Name of Organization

Date Signed

Location Worksheet

Location Map

Production Company: _____ Office Phone: _____

Production Title: _____ Episode No.: _____

Locations Manager: _____ Phone: _____

Location: _____ Date(s): _____

Move in Time: _____ Start Time: _____ End Time: _____ Move out Time: _____

Noise Bylaw extension required: Yes No

Scenes to be Filmed

Include detailed description and requirements of scenes (a separate page may be used to replace this section)

Crew & Vehicles

Total # of Cast & Crew _____

Total # of Crew Vehicles _____ Total # of Unit Vehicles _____

Proposed Locations for Vehicle Parking: _____

Traffic Control / Road Closures (List with times and dates)

Street/Lane _____ Time/Date _____
(specify and name)

Sidewalk _____ Time/Date _____
(specify which)

Lighting

Include equipment positions, area to be illuminated, type of light, ancillary equipment (stands, cranes, reflectors, etc.) Include positions on map and attach.

Cameras

Include equipment positions, ancillary equipment (tripod, dolly tracks, cranes etc.) Include positions on map and attach.

Indemnification Agreement

The undersigned Production Company (the "Applicant") has made application to the City of Parksville to carry out certain filming activities on certain lands and premises owned by or under the control of the City of Parksville known as the "Premises".

The undersigned Indemnitor will benefit directly or indirectly from such filming activities.

In consideration of being permitted to use the Premises and other good and valuable consideration, the receipt and sufficiency of which is hereby acknowledged by each of the Applicant and the Indemnitor, the undersigned agree as follows:

-
1. The Applicant and the Indemnitor will jointly and severally save harmless and indemnify the City of Parksville, its officers, employees, agents, tenants, licensees and contractors (the "Indemnified Parties") from and against all actions, claims, demands, proceedings, suits, losses, damages, costs and expenses of whatsoever kind or nature (including but not limiting the generality of the foregoing, in respect of death, injury, loss or damage to any person or property) arising in any way out of or in any way connected with the use of the Premises by the Applicant except to the proportionate extent that such actions, claims, demands, proceedings, suits, losses, damages, costs and expenses were caused by the Indemnified Parties or any of them.
 2. The Applicant will obtain and maintain at its own expense, for so long as the Applicant uses the Premises, a Comprehensive General Liability Insurance Policy with limits in an amount of not less than \$5,000,000 providing coverage against all claims for personal injury, death or property damage suffered by others arising directly or indirectly out of the use of the Premises by the Applicant. Such policy or policies shall have the City of Parksville and the Indemnified Parties added as Additional Insureds. The policy or policies shall be endorsed as follows:

It is hereby understood and agreed that this policy will not be cancelled, reduced, materially altered or amended without the insurer giving at least thirty (30) days prior written notice by registered mail to the City of Parksville.

The provision of such insurance shall not limit the indemnity provided in paragraph 1 above.

3. The Applicant will provide and maintain WorkSafe BC coverage and do everything reasonably practicable to establish and maintain a system to ensure compliance with Part 3 of the Workers' Compensation Board Amendment Act and the WCB OH&S Regulation.

Signed at _____, B.C. this _____ day of _____, 20_____

Name of the Production Company _____

Per: _____

Authorized Signatory

Print Name and Title: _____

Name of Indemnitor: _____

Per: _____

Authorized Signatory

Print Name and Title: _____
