



MOTION PICTURE APPLICATION

APPLICANT:

APPLICANT/COMPANY NAME AND ADDRESS:	
NAME OF PRODUCTION:	
TYPE/DESCRIPTION OF PRODUCTION:	
CONTACT PERSON:	PHONE:
SITE/LOCATION CONTACT:	PHONE:
LOCATION/ADDRESS OF FILMING OR PRODUCTION:	
DATES OF FILMING:	TIMES:
BRIEF DESCRIPTION OF REQUIREMENTS:	

INDEMNITY: The applicant will, upon approval is granted for the services or facilities requested in the application, indemnify and save harmless the Village of Harrison Hot Springs from and against any and all claims, including all claims for bodily injury or property damage caused by, arising from or connected with any act or omission of the applicant or any agent, employee, customer, licensee or invitee of the applicant arising out of the filming activity applied for, and against and respect of any such claims or any actions or proceedings brought thereon arising directly or indirectly from or in connection with the property, facilities or services provided by the Village of Harrison Hot Springs in connection with the filming activity applied for.

INSURANCE REQUIREMENTS: Upon approval of this application, the applicant will submit to the Village of Harrison Hot Springs an insurance certificate as evidence that comprehensive general liability insurance against claims for personal injury, death or property damage occurring upon or in or about the approved locations in an amount not less than \$5,000,000 per accident or occurrence is in force. The Village of Harrison Hot Springs and/or their officers, agents, employees and volunteers are to be shown as additional insured but solely with respect to the liability which arises out of the activities of the Named insured. The Municipality reserves the right to set the amount for limit of liability as appropriate.

AGREED TO AND ACCEPTED BY:

Authorized signature of Applicant:	Date:
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OFFICE USE ONLY:

Donation Provided	YES	<input type="checkbox"/>	Comments:	Date:
	NO	<input type="checkbox"/>		