



HARRISON HOT SPRINGS

Naturally Refreshed

Village of Harrison Hot Springs Filming Application

495 Hot Springs Road
Harrison Hot Springs, BC, V0M 1K0
604-796-2171

info@harrisonhotsprings.ca
www.harrisonhotsprings.ca/licencing

All applicable sections must be completed. Only complete applications will be accepted.

Applicant

Name/Company Name: _____

Mailing Address: _____

Contact Person: _____

Phone: _____ E-mail: _____

Same as above

Site/Location Contact: _____

Phone: _____ E-mail: _____

Production

Name of Production: _____

Type/Description of Production: _____

Location/Address of Filming or Production: _____

Dates of Filming: _____ Times: _____

Description of Requirements:

Applicant Signature

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 clams 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.*

Applicant (Print)

Signature

Date

Office-Use Only

\$200.00 Application Fee

Date: _____

Receipt #: _____

Filming Permit Approved

Date: _____

Signature: _____