

City of Ketchum

OFFICIAL USE ONLY					
Date Received					
Fee Received	_				
Assigned Permit No	_				

FILM PERMIT APPLICATION GUIDELINES

Return completed application and payment by mail or hand delivery to the City of Ketchum, P.O. Box 2315, 191 5th Street W., Ketchum, ID 83340. If you have questions, please contact Special Community Engagement Specialist Dawn Hofheimer@ketchumidaho.org or (208) 806-7047.

1. Application

• An applicant will be required to submit a permit request at least 15 business days prior to the date on which such person desires to conduct a permit required activity. If such filming activity interferes with trafic or involves potential public safety hazards, an application may be required at least 30 business days in advance.

2. Insurance Requirements

- General Liability \$1 Million
- Additional Insured Endorsement
- Hold Harmless
- Indemnification

3. Notification

- A written notification shall be distributed to the adjacent property owners or businesses by the applicant(s) at least 48 hours prior to filming if the following conditions occur:
 - 1. Impact to on-street parking
 - 2. Filming on public right-of-way such as street, sidewalk, etc.
 - 3. Use of any equipment that will generate noise
 - 4. Or, as it is determined by the city of Ketchum

4. Private Property

• An applicant is required to obtain the property owner's permission, consent, and/or lease for use of property not owned or controlled by the city. If filming will take place on private property, the production company must obtain written permission from the property owner.

5. Public Property

- If filming will take place on public (city owned) property and will affect pedestrian or vehicular trafic, the production company must notify the Ketchum Police Department and hire staff to be assigned to the site.
- If filming will take place on a city street, an MUTCD traffic control plan is required.

APPLICATION FEE					
NOTE: No Fee for Student Projects	\$200.00				
LOCATION FEES					
Motion: City Property	\$400/day				
Still: City Property	\$200/day				
ADDITIONAL FEES	'				
Safety and Public Works Personnel Services					
Location Modification/Unusual Use of City Facilities	'				
Other Fees May Apply					
CLIENT/PRIMARY PRODUCTION COMPANY					
Company:	Phone:				
Name of Applicant:	Phone:				
Address:	Email:				
LOCAL INFORMATION					
LOCAL INFORMATION					
Local Agency:					
Contact Name:	1				
Phone:	Email:				
FILMING LOCATIONS					
#1 Area Requested:					
Date:	Time:	am to	pm		
#2 Area Requested:					
Date:	Time:	am to	pm		
#3 Area Requested:					
Date:	Time:	am to	pm		
#4 Area Requested:					
Date:	Time:	am to	pm		
FILMING INFORMATION					
Non-Profit					
Government Agency					
☐ Private/Commercial					
Still Photography					
☐ Video/Filming					
# of Cargo Vans/Motorhomes: # of Crew:					
# of Models/Actors/Actresses:					

DESCRIPTION OF PROJECT
Description of set up.
Describe cameras, equipment, props, etc. that will be used.
Will any set up remain overnight? If so, please provide the name of the security company you will be using including days and hours they will be present.
Provide a description of the production and attach necessary additional information.
PURPOSE
State the purpose for this permit:
☐ Commercial
☐ Advertisement
☐ Public Service Announcement
☐ Catalog Shoot
☐ Other

INSURANCE REQUIREMENTS					
Attach a certificate of public liability insurance. Every applicant, at its sole cost and expense, shall obtain and maintain in ful					
force and effect throughout the entire term of the licensed special/filming event public liability insurance in the amount of on					
million dollars (\$1,000,000.00) per person and one million dollars (\$1,000,000.00) per accident. In addition, every applicant					
at its sole cost and expense, shall obtain and maintain public liability insurance for property damage in the amount of one million					
dollars (\$1,000,000.00). Certificates of such insurance shall be filed concurrently with the application for the special/filming					
event and will include an endorsement stating that the City of Ketchum is named as an additional insured and that said insurance					
will not be canceled or altered by the insurance company or applicant without ten (10) days prior written notice of such intended					
alteration or cancellation to the City. Current certificates of such insurance shall be kept on file at all times during the term of the					
special/filming event.					
Have you done the following?					
City of Ketchum named as an additional insured.					
General liability policy with a minimum of \$1 million per person and \$1 million per accident.					
Public liability insurance for property damage in the amount of \$1 million.					
Copy provided to Special Event Coordinator.					

Signature of Applicant: _____ Date: _____

INDEMNIFICAT	ION AGREEMENT		
shall indemnify and employees fr losses and expen caused by or aris maintain and spe shall be named i deemed a limita actions, or judgi	and save and hold harmle from and for any and all loss is a caused or incurred by sing out of the tortious controlled insured in the minimum artion of the covenants to it ments for damages or liable cing Applicant's compliance	ess the City of Ketchumsses, claims, actions, judy Applicant, its servants onduct of City or its off maintain, throughout the mount of one million do ndemnify and save and ability to persons or pro-	er referred to as "Applicant"), agrees that Applicant in, (hereafter referred to as "City"), City's officials, agents digments for damages, or injury to persons or property and is, agents, employees, guests, and business invitees and not ficials, agents or employees. In addition, Applicant shall be course of the "Filming" liability insurance in which City collars (\$1,000,000.00). The limits of insurance shall not be hold harmless City from and for all such losses claims, operty. Applicant shall provide City with a Certificate of its of this paragraph and file such proof of insurance with the
DATED this	day of	, 20	
Signature of Appl STATE OF IDAHC County of Blaine	licant:		
On this	day.of	20	, before me, a Notary Public in and for the State of Idaho,
			r proved to me upon satisfactory evidence to be the person
			ed to me that he/she executed the same.
WITNESS my har	nd and official seal.		
		Notary P	Public:
		Residing	at:

Commission expires: