



# CITY OF MUSKEGON FILM PERMIT APPLICATION

Phone: 231-724-6702



Company \_\_\_\_\_ Fed/State Employer \_\_\_\_\_

Production Title \_\_\_\_\_

Production Type \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip

E-Mail address: \_\_\_\_\_ Website \_\_\_\_\_

Phone (\_\_\_\_\_) \_\_\_\_\_ Fax (\_\_\_\_\_) \_\_\_\_\_ Cell (\_\_\_\_\_) \_\_\_\_\_  
Area Code Area Code Area Code

Location Manager \_\_\_\_\_

Location: (Provide address and specific area on the property. For multiple locations attach additional page.)  
\_\_\_\_\_  
\_\_\_\_\_

Name of Private Property Owner/Representative \_\_\_\_\_ Phone \_\_\_\_\_

Activity: (Provide a description of filming activity for each location). \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Traffic Control/Activity in Public ROW: No \_\_\_\_\_ Yes \_\_\_\_\_ Attach Watch Traffic Control Plan, see page 3.

Prep, Strike, and Filming Schedule (Attach separately):

Date(s) \_\_\_\_\_ Time(s) \_\_\_\_\_

Total Personnel (Cast and Crew) \_\_\_\_\_

Vehicles/equipment (i.e. generator) \_\_\_\_\_

Pyrotechnics/SpecialEffects \_\_\_\_\_

Technician \_\_\_\_\_ License # \_\_\_\_\_

FX # \_\_\_\_\_ Fire Permit # \_\_\_\_\_ Other \_\_\_\_\_

Insurance Company \_\_\_\_\_ Expiration Date \_\_\_\_\_

\_\_\_\_\_  
*Company Representative*

\_\_\_\_\_  
*Private Property Representative*

**By acceptance of this permit, permittee agrees to all the aforesaid conditions, including any attachments to this form.**

**Fees to be prepared by City staff.**

Permit Application Fee \$ \_\_\_\_\_

City Staff: \_\_\_\_\_ hours @ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Additional Costs \_\_\_\_\_ \$ \_\_\_\_\_

**Total Charges \$ \_\_\_\_\_**

**Make check payable to "City of Muskegon". APPLICATION FEE & STAFF TIME ARE NON-REFUNDABLE.**

# MUSKEGON

## HOLD HARMLESS AGREEMENT

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In consideration of the undersigned company being permitted to film in the City of Muskegon, it agrees to defend, indemnify and hold the City of Muskegon, Michigan, harmless from any and all claims of lawsuits arising out of the production company's activities within the City of Muskegon.

The undersigned represents that he/she has the authority to execute this letter agreement.

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

Signature: \_\_\_\_\_

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

Production Title: \_\_\_\_\_

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

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Phone No.: \_\_\_\_\_

Date of Filming: \_\_\_\_\_



**City of Muskegon**  
**933 Terrace Street**  
**P.O. Box 536**  
**Muskegon, MI 49443-0536**

