Application to Film/Photograph

**Insurance and Other Requirements**

**The following items are required by VTA to approve your request:**

* Letter of intent (including who, what, where, when and why)
* Your agreement with the following Indemnification Provision, evidenced by your signature at the bottom of this page:
	+ The Applicant shall indemnify, defend, and hold harmless Santa Clara Valley Transportation Authority (hereinafter “VTA”), its officers, agents and employees from any claim, liability, loss, injury or damage arising out of, or in connection with, performance of this Agreement by Applicant and/or its agents, employees or volunteers, excepting only loss, injury or damage caused by the gross negligence or willful misconduct of personnel employed by VTA.
* A Certificate of Insurance signed by your broker, including copies of all Endorsements that VTA may require
	+ Insurance Requirements will be provided upon receipt of completed application
	+ The Certificate and Endorsements must be received and approved prior to commencement of project.
	+ Equipment brought onto VTA property may be self-insured, but in no instance shall VTA be responsible for loss.
* Storyboards or a copy of the script if applicable

(If, upon review by VTA, the storyboards or script are deemed inappropriate for inclusion of VTA images, the production company will be notified and the request will be denied.)

* Right-of-Way Access Training (Provided by VTA - if applicable)

I HEREBY ACCEPT THE TERMS AND CONDITIONS OF THIS APPLICATION TO FILM/PHOTOGRAPH INCLUDING THE INDEMNIFICATION PROVISION ABOVE:

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

Printed name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Application To Film/Photograph Request

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Main contact name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of requestor:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Desired location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Preferred dates, time of day and duration of session: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Reason for filming/photos: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Number of participants including crew, subject(s): and client(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Type of equipment that will be used: (i.e. cameras, boards, lighting, generators, props, tracks…etc.)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**For your information:**

Film permit requests generally take 2 weeks to process.

**Fees:** Dependent upon the complexity of your session, production fees may be required

 (2 hour minimum. All fees must be paid by prior to the day of the session)

Onboard - If request requires the use of a light rail vehicle or bus while in service, then the vehicle must be rented out only during non-peak hours. (9:00 a.m. to 3:00 p.m.)

Right-of-Way training for all members of your production may be necessary depending on the desired location.

Other costs may apply depending on the complexity of the session.

Your contact information:

Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Fax:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

I CERTIFY THAT THE INFORMATION PROVIDED ABOVE IS TRUE AND CORRECT:

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