



COUNTY OF SAN BERNARDINO DEPARTMENT OF PUBLIC WORKS  
 PERMITS/OPERATIONS SUPPORT DIVISION - TRANSPORTATION  
 825 E. THIRD STREET ROOM 108  
 SAN BERNARDINO, CA. 92415-0835  
 (909)387-1863

**APPLICATION FOR FILMING PERMIT  
 7 DAYS MINIMUM NOTICE**

**\*\*ALL INFORMATION BELOW MUST BE PRINTED & COMPLETED OR PERMIT ISSUANCE WILL BE WITHHELD\*\***

PERMITTEE \_\_\_\_\_

DATE(S) OF ACTIVITY \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

ACTIVITY START TIME \_\_\_\_\_

CITY STATE ZIP CODE \_\_\_\_\_

ACTIVITY END TIME \_\_\_\_\_

AUTHORIZED SIGNATURE \_\_\_\_\_

PRINT NAME \_\_\_\_\_

TELEPHONE NUMBER ( ) \_\_\_\_\_

I hereby agree, as a condition of the granting of this permit to indemnify, defend (with counsel reasonably approved by County) and hold harmless the County and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of the granting of this permit from any cause whatsoever, including the acts, errors or omissions of any person and for any costs or expenses incurred by the County on account of any claim except where such indemnification is prohibited by law. This indemnification provision shall apply regardless of the existence or degree of fault of indemnitees. The Permittee's indemnification obligation applies to the indemnitees' "active" as well as "passive" negligence but does not apply to the indemnitee's "sole negligence" or "willful misconduct" within the meaning of Civil Code Section 2782.

PLEASE INDICATE WHICH COUNTY ROAD(S) YOU WILL UTILIZE DURING THE EVENT:

**(INCLUDE A MAP SHOWING YOUR LOCATION)** \_\_\_\_\_

Prior to issuance of permit, a Certificate of Insurance must be filed with the County of SB Department of Public Works, Permits/Operations Support Division, showing coverage of at least \$1,000,000 General Liability Insurance. The Certificate of Insurance must list the **COUNTY OF SAN BERNARDINO AS ADDITIONALLY NAMED INSURED.**

**PLEASE INDICATE SPECIFIC ACTIVITIES TO BE PERFORMED:** \_\_\_\_\_

**WILL EVENT REQUIRE ANY OF THE FOLLOWING:**

\_\_\_\_\_ Pyrotechnics, explosives, etc. \_\_\_\_\_

\_\_\_\_\_ Officers needed as follows: \_\_\_\_\_

\_\_\_\_\_ Traffic Control Devices needed per CHP recommendation: \_\_\_\_\_

**CALIFORNIA HIGHWAY PATROL**

OFFICE IN CHARGE OF FILMING ACTIVITY

AUTHORIZED SIGNATURE \_\_\_\_\_

TRAFFIC CONTROL REQUIRED \_\_\_\_\_

( )

TRAFFIC CONTROL NOT REQUIRED \_\_\_\_\_

DATE \_\_\_\_\_

(AREA CODE) PHONE NUMBER \_\_\_\_\_

Comments: \_\_\_\_\_