FILM PERMIT APPLICATION

City of Decatur

509 N. McDonough St. P.O. Box 220 Decatur, Georgia 30031 404-371-8386 • Fax 404-371-1593 shirley.baylis@decaturga.com



Project title				
Production company				
Permanent company address _				
			Permanent phone	
Local address				
Local phone	Local fax			
Producer	Production manager			
Location manager	Pho	one	Fax	
This project is a (check one)	☐ feature film ☐ document☐ corporate video ☐ comm	· —		
Size of crew	N	No. of production ve	hicles	
Film dates	Т	imes		
Fax	Mobile		_ Email	
	city police city parks			
	ay (payable to City of Decatur)			
Sanitation bond of \$100 re	Cemetery: \$1,000 first day + eceived (required if film shoot is ability insurance submitted and a	on public property)		al
Applicant's authorized agent	Signature		I	Date
City film coordinator approva	l Signature			Date

Proposed Filming Location

Please describe the location you propose to use. Draw or attach a simple diagram labeling streets, cross streets and/or alleys to be used, and the expected date, time, and duration of your activity. Indicate ALL streets/walks subject to closure or traffic/pedestrian control. For multiple locations, please copy form.

Parking

Describe proposed parking staging area including catering and equipment placement. Include all public parking areas to be occupied by production vehicles.

Signage

The City of Decatur has a strict sign ordinance. Please indicate any signage that you will be placing in the City of Decatur, including signage directing crew to the site, dates the signs will be posted, and when they will be removed. All signage must include a phone number for the person responsible for removing the signage.