



TUCUMCARI

Permit #:

Date:

Film Permit Application

New Application

Revised Request

ABOUT

Project Title: _____

Production Company: _____

Office Address: _____

Office Number: _____ Email: _____

Location Manager: _____ Cell: _____

Location Manager: _____ Cell: _____

SCENES

Film Location Address: _____			Exterior _____	Interior _____	Date & Time
					Begin Filming: _____
					End Filming: _____
Film Location Address: _____			Exterior _____	Interior _____	Begin Filming: _____
					End Filming: _____
Film Location Address: _____			Exterior _____	Interior _____	Begin Filming: _____
					End Filming: _____
Film Location Address: _____			Exterior _____	Interior _____	Begin Filming: _____
					End Filming: _____
Basecamp Location: _____			Exterior _____	Interior _____	Begin Filming: _____
					End Filming: _____

SERVICES

Sidewalk Closure	Road Closure	ITC	Fire	Police
Storage		City Building		
ITC Closure	Barricade setup time:	Removal time:		
On: _____	From: _____ To: _____	EB WB NB SB		
STREET	STREET	STREET		
ITC Closure	Barricade setup time:	Removal time:		
On: _____	From: _____ To: _____	EB WB NB SB		
STREET	STREET	STREET		
ITC Closure	Barricade setup time:	Removal time:		
On: _____	From: _____ To: _____	EB WB NB SB		
STREET	STREET	STREET		
ITC Closure	Barricade setup time:	Removal time:		
On: _____	From: _____ To: _____	EB WB NB SB		
STREET	STREET	STREET		

Department Signatures

All required signatures must be attained to become a permit

Permit #:

POLICE

206 E. Center
Tucumcari, NM 88401
(575) 461-2160

Approve
Deny

Chief

Date

Barricade: N/A Required

Comments: _____

FIRE DEPT.

123 N. Adams
Tucumcari, NM 88401
(575) 461-4400

Approve
Deny

Chief

Date

Emergency Access Lane Fire: N/A Required
Hydrant Access: N/A Required
Fire Extinguisher Standby Needed: N/A Required
Emergency Team Needed: Yes No Rescue Pumper
Special Considerations: N/A Required

Comments: _____

City Manager

215 E. Center
Tucumcari, NM 88401
(575) 461-3451

Approve
Deny

City Manager

Date

Comments: _____

Permit #:

I, _____, do hereby declare that the submitted scheduled filming will be conducted in accordance as stated in the preceding application. I understand that violations of ordinances or statutes will not be encouraged or permitted. I also understand that this permit, if approved, may be revoked by the City Manager if the Tukumcari Police Department or Tukumcari Fire Department, in their own opinion, any of the following occur: the event becomes a public nuisance, violations of statues or ordinances are committed by any participant. I understand that any significant changes (date, time, logistics, location and the like) to the filming after the date it was reviewed will require that I resubmit the "FILM PERMIT" and/or obtain approval of the changes from the respective departments.

Additionally, I understand that the City of Tukumcari will not be held responsible for changes made by the event organizer or participating entities prior to or during the event.

Signature of Applicant

Date



INDEMNIFICATION AGREEMENT

The Applicant, _____, acting through its authorized agent, _____, agrees to defend, protect, indemnify and hold the City of Tucumcari harmless from any and all suits, claims, damages, liabilities, or losses, including attorney fees and costs, for injury to or death of any person(s) or for damage to any property arising from the Applicant's acts or omissions under the film/photography permit or resulting from the filming/photography to be held on the locations, times and dates (Premises) named in the attached film permit.

In addition, the Applicant specifically agrees to defend, protect, indemnify and hold the City of Tucumcari harmless from any and all suits, claims, damages, demands, liabilities, or losses, including attorney fees and costs, brought, made, or claimed by the owner of the Premises, or the owner's heirs, successors, or assigns, arising from the Applicant's use of the Premises.

Authorized Agent Signature

Date

STATE OF NEW MEXICO }
 }
COUNTY OF QUAY }

The foregoing Indemnification Agreement was subscribed and sworn before me this ____ day of _____, 20____, by _____, the Authorized Agent for _____, the Applicant.

Notary Public

My Commission Expires