

City of Sunnyvale Film Permit Request

- Review and processing can take up to 14 business days.
- There is no fee for the permit; however, fees may apply if City services are needed.

Submit the following required documents to communications@sunnyvale.ca.gov.

- Film Permit Request
- Insurance forms:
 - a. Certificate of Insurance showing evidence of a commercial liability policy with limits of not less than \$1,000,000 and,
 - b. Additional Insured Endorsement (ISO form CG 2010704 or equivalent) naming the City of Sunnyvale, its officers, employees, agents and volunteers - *sample attached*

Your contact information

Name

Address

Phone number

Email

Date Time

Exact filming location

If on private property, confirmation of permission is needed. Include contact information.

Day of event contact name

Cell phone number

Please describe shot description and intended use.

How many people will be in your crew?

How many (if any) vehicles or trailers?

Are you using tents, generators, and lighting? If so, what type and size?

Are you using any simulated weapons (type and quantity)?

Will you have craft services (catering)?

Are you with a production company (provide name) or is this an independent film?

POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 20 10 07 04

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

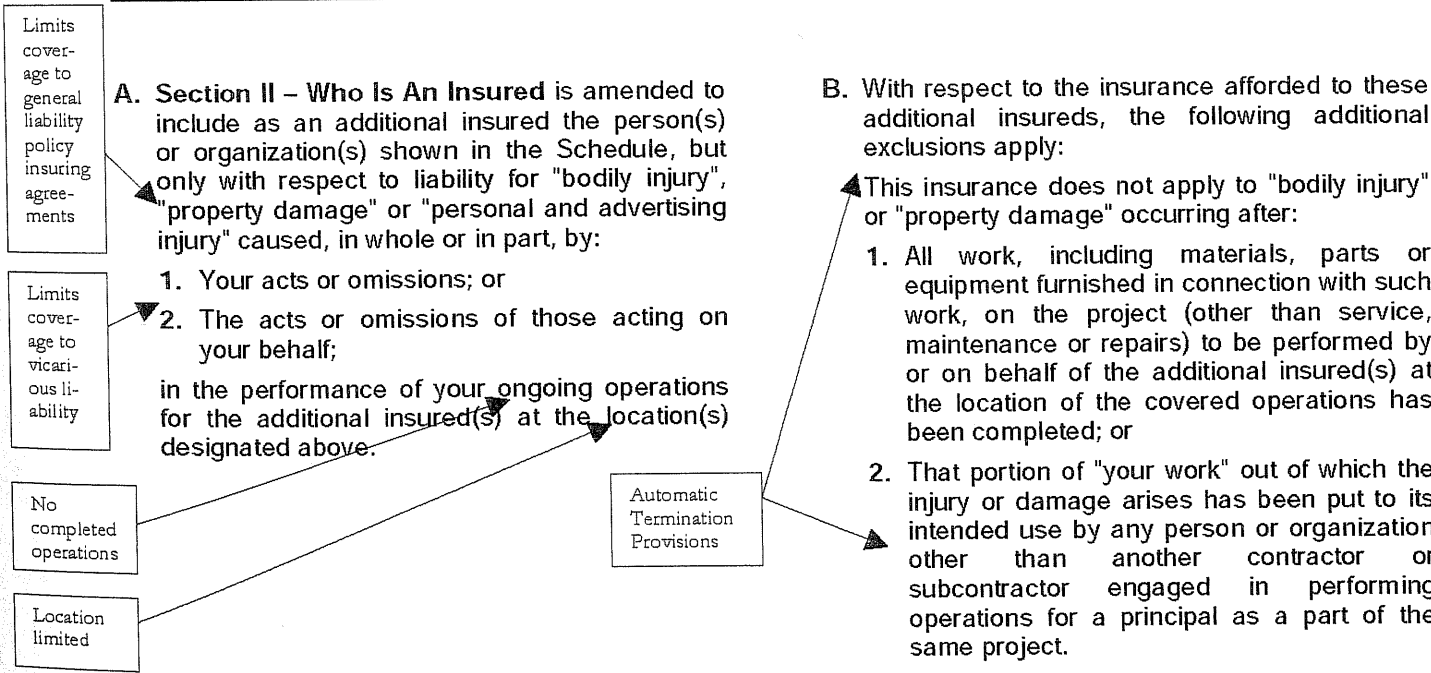
ADDITIONAL INSURED – OWNERS, LESSEES OR CONTRACTORS – SCHEDULED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):	Location(s) Of Covered Operations
Information required to complete this Schedule, if not shown above, will be shown in the Declarations.	



POLICY NUMBER:

COMMERCIAL GENERAL LIABILITY
CG 20 12 07 98

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

**ADDITIONAL INSURED - STATE OR POLITICAL SUBDIVISIONS
- PERMITS**

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

State or Political Subdivision:

(If no entry appears above, information required to complete this endorsement will be shown in the Declarations as applicable to this endorsement.)

Section II - Who Is An Insured is amended to include as an insured any state or political subdivision shown in the Schedule, subject to the following provisions:

1. This insurance applies only with respect to operations performed by you or on your behalf for which the state or political subdivision has issued a permit.
2. This insurance does not apply to:
 - a. "Bodily injury," "property damage" or "personal and advertising injury" arising out of operations performed for the state or municipality; or
 - b. "Bodily injury" or "property damage" included within the "Products-completed operations hazard".

CG 20 12 07 98

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