

Chelsea Improvement Company

1065 Avenue of the Americas, Suite 2400
New York, NY 10018
Tel: 212-584-1019
Fax: 212-719-3499
events@urbanmgt.com

PHOTO / FILM / VIDEO PERMIT APPLICATION

Shoot Day & Date: _____ Area of Requested: _____

Time of Shoot: _____ Number of Participants: _____

Time of Set-Up: _____ Time of Break-Down: _____

Applicant Name: _____

Company/Agency/Sponsor: _____

Address: _____ City, State, Zip: _____

Phone: _____ E-mail: _____

Cell/Other: _____ Fax: _____

Purpose of Shoot (publication, display, etc.): _____

Equipment to be used: _____

Requirements:

- ◆ **Contribution of _____ and Certificate of Insurance** (naming Chelsea Improvement Company and The City of New York as additional insureds on a general liability policy) must be received prior to the shoot.
- ◆ A **map** indicating details of the shoot.
- ◆ A copy of the finished product on **DVD** for CIC's archives.
- ◆ Recognize Chelsea Improvement Company as a **credit** at the end of the finished product.
- ◆ Provide _____ **damage deposit** to be held until after a post-shoot evaluation of the site.

I hereby certify that the above information is complete and correct and agree to all requirements set forth.

Signature: _____ Date: _____

Please return to: Chelsea Improvement Company, attention: Photo/Film Shoot Coordinator

For Office Use Only Application Approval by Chelsea Improvement Company

_____ Date: _____

Chelsea Triangle

