

SHOOT NAME _____ SHOOT DATE ___/___/___



Location Shoot Application and Permit

BOROUGH OF SEASIDE HEIGHTS

901 Boulevard, Seaside Heights, NJ 08751
(732)-793-9100 Fax: (732)-793-0319/793-0238
Email CommunityImprovements@seaside-heightsnj.org
www.seaside-heightsnj.org

NOTE: The first page of this application will be returned to you as your permit. All pages must be completed in full in order to be considered. Please read the instructions on page 2.

Applicant _____

Tel# _____ Fax# _____ email _____

Address _____

Representing _____

Tel# _____ Fax# _____ email _____

Address _____

Type of Shoot _____

Location of the Shoot _____

Schedule (list all dates and times) _____

Set-up schedule _____ Break-down schedule _____

Rain or cancellation date(s) _____

Signature of the Borough Director of Public Affairs below certifies approval of this event subject to all municipal, state, and federal ordinances, statutes, and regulations. Conditions to the approval, as indicated below, are on the back of this form. Proper insurance certificates

Hold Harmless ___/___/___ Certificate of Insurance ___/___/___ Conditions: ()Yes ()No

DO NOT WRITE IN THIS AREA

Approval recommended: [] Yes [] No By _____ Date _____

Approval _____

must be provided prior to the event or this approval will be revoked.

INSTRUCTIONS: Be careful to not understate your needs-last minute requests may not be able to be fulfilled. There is a \$25 fee for this application.

All questions on this application must be fully answered. If a question does not apply to your shoot, write "N/A" in the space for the answer. If you need more room for an answer, attach a

separate piece of paper and reference this addition on the form. **TYPE OR PRINT YOUR ANSWERS.** In order to expedite the processing of this application, attach any diagrams and schedules that you feel would help those reviewing the application. If this is a filming, include a synopsis of the film/television show or and its anticipated rating.

Please note: Vehicles are allowed on the Beach or Boardwalk, no distribution of flyers or hand-outs of any kind on the Beach or Boardwalk.

A HOLD HARMLESS AGREEMENT must be completed and RETURNED WITH THIS APPLICATION. The proper CERTIFICATE OF INSURANCE must be delivered to the Public Affairs Department prior to the commencement of your shoot or the shoot will be canceled. If there will be any type of cooking, a state fire permit may be required ~ **please call State of N.J. Division of Fire Safety, at (609) 633-6132.**

How can the person in charge be contacted during the event:

If any equipment will be on site overnight, how can someone be contacted during the evening:

If police assistance is desired for security, escorts, crowd control or traffic control, describe the need and your request:

What are your security arrangements if you are not requesting Seaside Heights Police or in addition to Seaside Heights Police (any armed security must be approved by the Chief of Police):

If you desire any special assistance or equipment from the Borough of Seaside Heights, describe what you are requesting:

Will meals/catering be purchased or lodging rented within Seaside Heights? From whom?