



City of Marco Island  
Community Affairs Department  
50 Bald Eagle Drive  
Marco Island, FL 34145  
Phone: 239-389-5000 or FAX: 239-393-0266

PF-08

**SPECIAL EVENT – FILM PERMIT**

Petition number: **TU-**\_\_\_\_\_ Date Received: \_\_\_\_\_

Planner: \_\_\_\_\_

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**ABOVE TO BE COMPLETED BY STAFF**

Production Company: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Agent: \_\_\_\_\_

Local Address: \_\_\_\_\_

Local Phone: \_\_\_\_\_

Production Schedule. List all City of Marco Island locations, dates and times:  
*(use additional sheet if necessary)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Type of production:

- |  |  |  |
|--|--|--|
| <input type="checkbox"/> TV movie/special        | <input type="checkbox"/> TV series/pilot           | <input type="checkbox"/> TV commercial |
| <input type="checkbox"/> feature film            | <input type="checkbox"/> music video               | <input type="checkbox"/> PSA           |
| <input type="checkbox"/> documentary/educational | <input type="checkbox"/> industrial/business video | <input type="checkbox"/> still photo   |
| <input type="checkbox"/> other _____             |  |  |

Client, product or project: \_\_\_\_\_

Dollar amount anticipated to be spent: \_\_\_\_\_

Number of local hires: \_\_\_\_\_

Total hotel room nights (number of rooms X number of nights): \_\_\_\_\_

Number of Personnel: Crew: \_\_\_\_\_ Actors: \_\_\_\_\_ Models: \_\_\_\_\_

The following special effects, if used, may require additional permitting: stunts (vehicle or other), explosives, incendiary devices, burns/fires, fireworks, firearms, temporary structures, and aircraft. Please indicate detailed information:

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**A use that requires the closing of a street or sidewalk may require a Right-Of-Way Permit.**

Provision for sanitary and waste disposal facilities may be required.

Attach Certificate of Insurance (\$1,000,000 minimum, with **City of Marco Island, Florida** named as additional insured); and a check for fifty dollars (\$50.00) made payable to the **City Marco Island**.

Approval of this permit does not exempt the applicant from obtaining applicable permits from Federal, State, Regional and/or local agencies.

The applicant, in consideration of receiving a Motion Picture and Film Permit from the City of Marco Island shall indemnify, defend and hold harmless the City of Marco Island, its officers, agents, and employees from and against all claims, suits, actions, damages, liabilities, expenditures or causes of action of any kind arising out of or occurring during the activities of the applicant from any negligent act, omission or error of the applicant, its agents, servants or employees resulting in or relating to bodies, life, limb or property sustained in, about or upon the permitted premises or improvements thereto, or arising from the use of the premises.

\_\_\_\_\_  
Applicant's signature                      Applicant's title                      Date

\_\_\_\_\_  
Approval signature                      Title                      Date

**A SIGNED COPY OF THIS DOCUMENT WILL BE FAXED BACK TO THE NUMBER INDICATED ABOVE. PLEASE KEEP A COPY WITH THE PRODUCTION AT ALL TIMES WHILE ON LOCATION.**