

Eric L. Adams  
Mayor



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\* SIDEWALKS & CITY PROPERTY ONLY - AS AVAILABLE

Reset Form

## OPTIONAL PERMIT MOTION PICTURE/STILL PHOTOGRAPHY

This application is for permission to use the streets and sidewalks of the City of New York subject to the City's jurisdiction to take location photography and is to be filed with the Permit Division, 1697 Broadway, 6th Floor, New York, NY 10019 (212)489-6710

COMPANY NAME \_\_\_\_\_ DATE \_\_\_\_\_

REPRESENTATIVE \_\_\_\_\_ PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CO. ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

DATE FROM: \_\_\_\_\_ TO: \_\_\_\_\_ TIME FROM: \_\_\_\_\_ TO: \_\_\_\_\_

LOCATION \_\_\_\_\_

DATE FROM: \_\_\_\_\_ TO: \_\_\_\_\_ TIME FROM: \_\_\_\_\_ TO: \_\_\_\_\_

LOCATION \_\_\_\_\_

DATE FROM: \_\_\_\_\_ TO: \_\_\_\_\_ TIME FROM: \_\_\_\_\_ TO: \_\_\_\_\_

LOCATION \_\_\_\_\_

DATE FROM: \_\_\_\_\_ TO: \_\_\_\_\_ TIME FROM: \_\_\_\_\_ TO: \_\_\_\_\_

LOCATION \_\_\_\_\_

DESCRIPTION OF SCENE \_\_\_\_\_

Motion Picture ☐ Still Photography ☐ # in Group \_\_\_\_\_

CONDITIONS OF PERMIT: BY SIGNING THIS PERMIT YOU ARE AGREEING TO UPHOLD ALL CONDITIONS LISTED BELOW

- Handheld equipment only (including tripod for camera)
- Not valid unless signed by Mayor's Office Film Coordinator. Permit form must be typed.
- Permit does not include special parking privileges. Please park in legal areas. All permits are subject to MOFTB rules & regulations.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF APPLICANT

*OFFICE USE ONLY, DO NOT WRITE BELOW THIS LINE*

The applicant agrees to indemnify the City Of New York and to be solely and absolutely liable upon any and all claims, suits, and judgments against the City and/or the applicant, his (its) employees or otherwise. The applicant further agrees to comply with all pertinent provision of New York laws, rules and regulations including, but not limited to Sec. 20-453 of New York City Administrative Code which prohibits general vending on the streets of the City of New York without a license issued by the Department Of Consumer Affairs.

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRODUCTION COORDINATOR