APPLICATION FOR FILMMAKING/PHOTOGRAPHY

(Application must be submitted at least one (1) month prior to event)

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<tr>
<th>Application Date:</th>
<th>Organization/Company Name and Address:</th>
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Application Contact Person:

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<th>Business/Home Phone:</th>
<th>Cell Phone:</th>
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E-mail: _______________________

Contact Person(s) for Day of filming: _______________________

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FILMING / PHOTOGRAPHY SHOOT DETAILS

Attached separate sheet if necessary

Title of Shoot:

Day & Expected Time of Shoot:


Will any street or sidewalk be blocked?  [ ] Yes  [ ] No  If yes, please describe in detail in a letter attached to this application.

☐ MUNICIPAL PROPERTY
   (list location name & address)

☐ PRIVATE PROPERTY
   (list address, owner name & contact information)

For use of The Green: Contact the Trustees of the Morristown Green at 973-539-4900. NOTE: Written approval for use of The Green MUST be granted before this application can be considered for approval by the Town.

How many persons to attend: ______  How many vehicles at shoot: ______

If special vehicle accommodations are necessary, please describe in detail in a letter attached to this application.

Required attachments to this application:

1. List ALL other equipment that will be use during shoot
2. If shoot occurs over multiple days, provide full schedule
3. Certificate of Insurance, identifying the Town of Morristown as Certificate Holder
4. Completed Hold Harmless Agreement

Additional information from applicant may be requested to determine approval. If it is determined that the event will have a large impact to a specific area, it is the responsibility of the Applicant to notify the affected residents and business owners of the event date, location and duration. Applicant will also be required to supply list of who was notified and when information was provided. A copy of the information supplied to affected parties must be provide to the Town Clerk's Office.

[ ] Check here to acknowledge that a fee may be required for the purpose of public safety. The Morristown Police Bureau and Division of Public Works reserve the right to invoice any party that requires Public Safety assistance. Additionally, the Town reserves the right to deny any application for this reason.

Print Applicant Name(s): _______________________

Signature: _______________________

Date Submitted: _______________________

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**DO NOT WRITE BELOW THIS LINE**

OFFICIAL USE ONLY

Application Received by: _______________________

Date Received: _______________________

Date Submitted: _______________________

[ ] Approved for Processing  [ ] Not Approved

Business Administrator Approval: _______________________

Date: _______________________