DUKES COUNTY

FILM – VIDEO- TELEVISION- PHOTOGRAPHY

APPLICATION

APPLICANT INFORMATION - REQUIRED

First & Last Name of Primary Contact:		
On-Island Contact (If different than Primary Contact) :		
Primary Email Address:		
Cell Phone: Phone Number:		
Production Company:		
Billing/Mailing Address of Production Company:		
Host Type Non-Profit (Please Attach 501(c)(3) Documentation) For-Profit Student		
COMMERCIAL PRODUCTIONS		
Commercial Filming- Type Photography/ Photo Shoot Small <10 Production Video/B-Roll Large >10 Production		
Description of Requested Filming:		
Requested Location(s) of Film:		
Start Date & Time End Date & Time		
Multiple Date Filming (Please list all dates for requested filming):		
Full Shot List – REQUIRED (Please attach a complete shot list, including times, location, and crew size).		
NON PROFIT PRODUCTIONS Type of Organization: On-Island Non- Profit Off-Island Non-Profit Student Film		
Non-Profit Filming- Type		
Photography/ Photo Shoot Video/ B-Roll Small < 10 Production Large > Production		

Description of Requested Filming:		
Requested Location(s) of Filming:		
Start Date & Time	End Date& Time	
Multiple Date Films (Please list all dates for requested	filming):	
Full Shot List- REQUIRED (Please attach a complete shot list, including times, location, and crew size).		
NOTICES FOR ALL PRODUCTIONS		
All Filming must comply with the 10:00 pm Noise Ordi be approved by the County Manager.	nance. Requests for extension past 10:00 pm must	
Important Notice – For filming in Downtown Historic E Selectmen at <u>selectmen@edgartown_ma.us</u> for additional control of the selectmen and the selectmen and the selectmen are selectmen as a selectmen as a selectmen are selectmen as a selectmen are selectmen as a selectmen are selectment as a selectment		
Filming on a Beach? Please learn more about beach powww.dukescounty.org under Beach Management.	ermitting process, rules and regulations at	
HOLD HARMLESS AGREEMENT In consideration of permission to use the public proper Applicant agrees to save and hold the County of Dukes employees harmless from any and all liabilities or cost by the Applicant, the Applicant's guests, employees, so Applicant acknowledges that the permission to utilize premises herein described (if applicable), and that the described. Notwithstanding the foregoing, this Hold H claim asserted against the County of Dukes County, its incurred arising out of the Applicant's activity whether permitted type or locale of activity or occurs on a different Liability is required in the amount of \$1,000,000 CSL (county added as an additional insured.	s County, its agents, officials, contractors, and is arising out of the use of the described premises abcontractors, and/or other persons. The the facilities is limited to the portion of the permission is valid only for the activity herein armless Agreement shall be applicable to any agents, servants, and employees, and for any loss or or not such claim or loss extends beyond the erent date than specified. Commercial General	
SIGNATURE OF APPLICANT		
By typing your name in the applicant signature field(s) email), you affirm that all information contained within the best of your knowledge and you understand that youngers the same as signing your physical signature by	n this document was completed truthfully, and to your electronic signature is considered legally	
Signature of authorized person:		
E-mail:		