

VILLAGE OF OLD BROOKVILLE
201 McCouns Lane
Old Brookville, NY 11545
516 671-4664 Fax 516 671-4725
Email village@oldbrookville.net

COMMERCIAL FILMING APPLICATION

1. NAME OF PROJECT: _____

2. NAME OF COMPANY: _____

ADDRESS: _____

3. CONTACT PERSON: _____ PHONE# _____

E-MAIL ADDRESS: _____

4. LOCATION OF SHOOT: _____

5. DATES: _____

6. HOURS OF OPERATION: _____

7. # OF PEOPLE INVOLVED: _____ # OF VEHICLES _____

8. PARKING LOCATION _____

9. SIGNED CONSENT OF THE OWNER(S) OF PROPERTY TO BE USED IN OR FOR THE FILMING:

PRINT NAME: _____ DATE: _____

SIGNATURE: _____

PRINT NAME: _____ DATE: _____

SIGNATURE: _____

10. OTHER INFORMATION THE BOARD OF TRUSTEES MAY REQUIRE:

INSURANCE REQUIREMENTS:

Workers Comp
Commercial General Liability
Auto
The Village of Old Brookville must be named as Certificate Holder and
named as an additional Insured
Hold Harmless Agreement

ADDITIONAL REQUIREMENTS:

Applicant must coordinate with the Old Brookville Police Department at (516) 626-1300

Applicant is responsible for notifying neighbors of the intent to film.

APPLICATION FEE: \$500.00

PERMIT FEE: \$3,000.00 PER DAY