CARSON CITY

Film Permit Application

108 E. Proctor Street
Carson City, NV 89701
(775) 887-2105

Please submit applications to:
specialevents@carsoncity.gov

PERMIT NUMBER:

DATE PERMIT RECEIVED:

PRODUCTION COMPANY NAME:

ESTIMATED NO. OF SHOOTING DAYS:

COMPANY ADDRESS:

PHONE:

EMAIL ADDRESS:

LOCATION MANAGER / POINT OF CONTACT:

PHONE:

EMAIL ADDRESS:

PRODUCTION TITLE:

TYPE OF FILMING EVENT (CIRCLE ONE):

TV MOVIE / EPISODE FEATURE FILM SHORT FILM MUSIC VIDEO COMMERCIAL OTHER:_____

DATES:

TIME:

NUMBER OF CAST & CREW:

FILMING LOCATION(S):

FILMING DESCRIPTION (PLEASE ATTACH ADDITIONAL PAGES IF NECESSARY):

IS A STREET CLOSURE REQUESTED? ☐ **YES** ☐ **NO**

Proposed street closure

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PLEASE CHECK ALL THAT APPLY:

- ☐ **SPECIAL EFFECTS/PYROTECHNICS**
- ☐ **TENTS, CANOPIES OR ANY TEMPORARY STRUCTURES**
- ☐ **LOW FLYING AIRCRAFT, STUNTS, CHASE SCENES**
- ☐ **ANY ACTIVITY THAT WILL OBSTRUCT EGREE OR INGRESS TO BUILDINGS**
- ☐ **INTERMITTENT TRAFFIC CONTROL**
- ☐ **FILMING USING AERIAL DRONE (MUST PROVIDE FAA APPROVALS)**
- ☐ **WILL ANY WEAPON PROPS BE USED (GUNS, KNIVES, ETC.)**
- ☐ **ANIMALS OR LIVESTOCK**
- ☐ **REQUESTING PUBLIC SAFTEY SERVICES (POLICE, FIRE, EMERGENCY MEDICAL SERVICES)**
- ☐ **STUNTS - PLEASE DESCRIBE: _____**
- ☐ **OTHER: _____**

VEHICLES AND EQUIPMENT (PLEASE ENTER QUANTITY):

CARS/VANS	**MOTORHOMES**	**CATERING TRUCKS**
TRAVEL TRAILERS	**5TH WHEELS**	**OTHER:**

THE FOLLOWING INFORMATION IS REQUESTED BY THE NEVADA FILM OFFICE:

Nevada Film Office registration number: _____

Please visit https://nevadafilm.com/register/ for more information or to register.

I hereby certify that the above information is correct to the best of my knowledge and belief. I understand that failure to complete this form truthfully is an act of perjury.

Signature _____ Title:_____

Print Name _____ Date:_____