

Patricio Garcia
Community Development
Director



Gabriel Boyle
Planning & Zoning
Director

Filming and Movie Production Permit Application

| | | |
|-------------------|---|----------------------------|
| PERMIT# _____ | PERMIT TYPE: LARGE-SCALE (>80ppl) _____ | SMALL-SCALE (<80ppl) _____ |
| REQUEST MAP _____ | DATE _____ | CONFERENCE DATE _____ |

NAME OF APPLICANT/ MANAGER: _____
(PLEASE PRINT) LAST FIRST

NAME OF PRODUCTION COMPANY: _____

FILM PRODUCTION TITLE: _____

MAILING ADDRESS: _____
STREET CITY STATE ZIP

PHONE: (BUSINESS) _____ (CELLULAR) _____

Location of film site, include place name, main road intersection, landmarks, etc.

FILM SITE RURAL ADDRESS: _____ FILM SITE UPC: _____

PRE-FILMING CONFERENCE SECTION:

Attach vicinity map of the filming site area. If applicant is not able to produce a vicinity map, one can be produced for the applicant by the County Planning and Zoning Department at a cost of \$15.00.

Map Received, attached _____ Planner Initials

Attach certificate of General Liability Insurance with a coverage amount of \$1,000,000.

Insurance Certificate Received, attached _____ Planner Initials

Attach tentative schedule of filming times and dates.

Filming schedule received, attached _____ Planner Initials

Attach security deposit check (if deemed necessary). _____ Planner Initials

The planner assigned to this conference will determine, through interview, what resources are required to safely allow for film and movie production.

WEBSITE: www.rio-arriba.org

1222 Industrial Park Rd Espanola, New Mexico 87532
PO Box 127 Tierra Amarilla, New Mexico 87575

Phone (505) 753-7774 Fax (505) 753-4732
Phone (505) 588-7254 Fax (505) 588-7810

| QUESTION | YES | NO | OBTAIN APPROVAL FROM: |
|--|-----|----|-----------------------|
| Will there be explosive blasting? | | | |
| Will there be stunt scenes where people may be subject to bodily injury? | | | |
| Will there be a need to create fire/ burn foliage or man-made structures? | | | |
| Will there be a need to fire blank shells from a firearm? | | | |
| Will there be a need to create motor vehicle accidents? | | | |
| Will there be a need to stop or divert motor vehicle traffic on County, State or private roads? | | | |
| Will there be a need to create long-duration noises which may disturb the surrounding population? | | | |
| Will the production crew and support staff be located at the filming site overnight and how many persons will be at the site for daily activities? | | | |
| Does the production company have a removal plan for liquid and solid waste? | | | |

ASSOCIATED FEES FOR FILMING;

| | |
|--|--|
| Planning Dept. Application Fee: | \$15.00 |
| Planning Dept. Inspection Fee: | \$40.00 |
| Vicinity Map | \$15.00 (if needed) |
| Large Scale & Small Scale Filming Permit: | \$75 from one to seven days, \$15 each additional day. |
| EMS Coordination: | \$65.00 an hour, minimum of four hours. (if needed) |
| Fire Department Inspection Fee: | \$50.00 (if needed) |
| 750 to 1500 gallon Fire Department Engines/ Tankers: | \$75.00 an hour, minimum of four hours. (if needed) |
| 300 gallon or less Fire Department Brush Truck: | \$55.00 an hour, minimum of four hours. (if needed) |
| Fire, EMS Personnel | \$35.00 an hour, up to eight hours in one day. (if needed) |
| Fire, EMS Personnel (O/T) | \$52.00 an hour, over eight hours in one day. (if needed) |
| Sheriff Detail Duty | \$50.00 an hour, up to eight hours in one day. (if needed) |
| Sheriff Detail Duty (O/T) | \$75.00 an hour, over eight hours in one day. (if needed) |

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I (We) as the applicant(s) for a filming permit, have read and do hereby agree to, and understand the above terms and conditions without reservation and place my/our signature below as an act of such agreement. It is further agreed and understood that I (we) will follow the rules and regulations of the Film and Movie Production Ordinance and obey the laws of Rio Arriba County and the State of New Mexico. This permit is issued specifically to the applicant for the land indicated in the application and is not transferable.

APPLICANT SIGNATURE: _____ **DATE:** _____

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FIRE MARSHALL SIGNATURE: _____ **DATE:** _____

FIRE MARSHALL COMMENTS:

SHERIFF SIGNATURE: _____ **DATE:** _____

SHERIFF COMMENTS:

STATE POLICE SIGNATURE: _____ **DATE:** _____

STATE POLICE COMMENTS:

EMS COORDINATOR SIGNATURE: _____ **DATE:** _____

EMS COORDINATOR COMMENTS:

FINAL APPROVAL : _____ **DATE:** _____

PLANNING & ZONING DEPARTMENT

This Permit not valid without final approval and signature from Planning and Zoning Department.

PLANNING AND ZONING COMMENTS:

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