

Commercial Photography Permit Application

Return completed application to:

Spokane Parks & Recreation Department
ATTN: Marketing/Communications
808 W Spokane Falls Blvd
Spokane, WA 99201-3317

www.spokaneparks.org

Today's Date:

Project Name:

Company Name:

Company Address:

Company Phone Number:

Local Address (if different from above):

Email Address (if Applicable):

Location Manager:

Cell Number:

Project Type: (check one)

- Feature Film
- Documentary(Short Subject)
- Television Programming
- Music Video
- Public Service Announce
- Training Film
- TV Movie
- Corporate Video
- Commercial (Advertisement)
- Still Photography

Proposed Filming Dates:

Proposed Filming Location/Times:

Itemize anticipated additional services (if any):

The refundable deposit and fees may be paid by phone with Visa , Mastercard, or Debit card, in person with a credit card, cash or check. If using a check, please make the check payable to City of Spokane.

Applicant's Signature:

Date:

OFFICE USE ONLY

Use Fee: \$ _____

Deposit Amt: \$ _____

Insurance Submitted?: ___ YES ___ NO

___ Damage to park property noted on: _____

Insurance Policy Number: _____

___ Deposit returned upon request (no damage) on: _____

SPECIAL NOTES:

___ Damage noted. Deposit NOT RETURNED

Film Permit # _____

Recorded in Film Log on: ___/___/___.

APPROVAL: (Director of Parks or Designee) _____

Date: _____