

APPLICATION TO FILM OR VIDEOTAPE ON CITY STREET OR OTHER CITY PROPERTY

Application and Insurance must be provided three (3) days prior to event.

Applicant Name		Phone	
		Cell Phone	
Street Address	City	State	Zip
Production Company/Organization (if different from above)		Phone	
Street Address	City	State	Zip
Date(s) of Event	Time(s) of Event		
Location of Event			
Description of Event			
Impact on Traffic or Parking			
Impact on Adjacent or Other Properties			
Description of special equipment, vehicles, etc. involved in event		Number of Persons Involved (crew, etc.)	
Anticipated Need for City Services (e.g. – Police, Parks Maintenance, etc.)			
<p>The applicant acknowledges the following:</p> <ul style="list-style-type: none"> • The applicant agrees to obtain and maintain a certification of insurance as described on the reverse side of this application demonstrating coverage throughout the approved period of the event. Should the insurance be cancelled without notice to the City, the applicant agrees to personally indemnify and hold the City of Royal Oak harmless and defend it against all demands, claims, causes of action or judgements and from all expenses that may be incurred in defending against the same, arising from any act, neglect or omission on the part of the applicant, its agents and/or employees, pursuant to this event. • The applicant agrees to obtain signed approval from any business or property owner specifically effected by the event. • The use of the City's name, seal, signage, equipment, or personnel is prohibited without the expressed consent of the City of Royal Oak. • The applicant agrees to reimburse the City of Royal Oak for the cost of any services provided by the City as a result of the event. The applicant understands that the City of Royal Oak shall determine and approve the need for such services. If the applicant anticipates the need for City services in advance of the event, the applicant shall notify the City and receive an estimated cost from the City prior to approval of the application. 			
Signature of Applicant		Date	

INSURANCE CERTIFICATE REQUIREMENTS

- Comprehensive General Liability: \$1,000,000/occurrence (minimum)
- Excess Liability Umbrella: \$1,000,000/occurrence (minimum)

Additional Insured endorsement portion of the Certificate of Insurance must read exactly as follows:

“The City of Royal Oak, including all elected and appointed officials, all employees and volunteers, all boards, commissions and/or authorities and their board members, employees and volunteers.”

Cancellation Notice portion of the Certificate of Insurance must read exactly as follows:

“Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will mail thirty (30) days written notice to the Certificate Holder.”

Note – words in existing form language may be struck out to achieve the above requirement as indicated in the sample certificate.

USE OF CITY PARKING METERS

Complete this section if the use of City parking meters will be required for this event

Location of Parking Meters

Meter Identification Numbers

Instructions:

1. The applicant must complete payment for use of meters with the City Treasurer, located in City Hall.
2. The applicant must then provide proof of payment to the Royal Oak Police Traffic Sergeant or clerk.
3. The applicant must then post the appropriate bond with the Traffic Sergeant or clerk for use of necessary meter bags.
4. Following the event, the applicant must return meter bags to the Traffic Sergeant or clerk and retrieve the bond.

- *The Traffic Safety Division is located on the first floor of the Police station, adjacent to the lobby.*
- *The Traffic Sergeant may be reached at (248) 246-3508, the Traffic Clerk may be reached at (248) 246-3509*

APPROVAL

Signature of Police Representative Approving Application

Date

Printed Name

Rank / Title

\$12.⁰⁰ Fee Paid on _____ Clerk _____
 Cash or Check Payable to the City of Royal Oak only
 Established by Resolution on 6/13/05

Applications are available at www.ci.royal-oak.mi.us., or City Clerk's Office
 Return application and fee to Clerk's Office, 211 Williams, Royal Oak MI 48068

Denial of application may be appealed to the City Commission by making application for appeal to the City Manager.

CERTIFICATE OF LIABILITY INSURANCE 4/18/2006

PRODUCER Sample Insurance Agency, Inc. 123 N Main Street Royal Oak MI 48067-2619	This certificate is issued as a matter of Information only and confers no rights upon the certificate holder. This certificate does not amend, extend or alter the coverage afforded by the policies below.
COMPANIES AFFORDING COVERAGE	

INSURED ABC Company 321 S Main St Royal Oak MI 48067	Company A NORTHTOWN INSURANCE CO. Company B Company C Company D
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COVERAGES

This is to certify that the policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain. The insurance afforded by the policies described herein is subject to all the terms, exclusions and conditions of such policies. Limits shown may have been reduced by paid claims.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (mm/dd/yy)	POLICY EXPIRATION DATE (mm/dd/yy)	LIMITS	
A	General Liability	BND-JXXXX01-1231	00/00/0000	00/00/0000	Each Occurrence	1,000,000
	<input checked="" type="checkbox"/> Commercial General Liability				Damage to Rented Premises (ea occurrence)	100,000
	<input type="checkbox"/> Claims Made				Med Exp (Any one Person)	2,000
	<input checked="" type="checkbox"/> Occurrence				Personal & Adv Injury	1,000,000
	<input type="checkbox"/> Owner's & Contractors Prot				General Aggregate	1,000,000
					Products, Comp/Op Agg	1,000,000
	Automobile Liability				Combined Single Unit	\$
	<input type="checkbox"/> Any Auto				Bodily Injury (per person)	\$
	<input type="checkbox"/> All owned Autos				Bodily Injury (per accident)	\$
	<input type="checkbox"/> Scheduled Autos				Property Damage	\$
	<input type="checkbox"/> Hired Autos					
	<input type="checkbox"/> Non-Owned Autos					
	Garage Liability				Auto Only - Ea Accident	\$
	<input type="checkbox"/> Any Auto				Other than Auto Only:	
					Each Accident	\$
					Aggregate	\$
	Excess Liability				Each Occurrence	
	<input type="checkbox"/> Umbrella Form				Aggregate	
	<input type="checkbox"/> Other than Umbrella Form					\$
	Workers Compensation and Employers' Liability				WC Statutory	
	The Proprietor / partners / executive officers are:				__ Limits __ Other	
	__ INCL __ EXCL				EL Each Accident	\$
					EL Disease - Policy Limit	\$
	OTHER					
	Liquor (if applicable WDC)				BPPXXXXXX	00/00/0000
	Liquor -Sidewalk Cafes	BPPXXXXXX	00/00/0000	00/00/0000	\$300,000	

SAMPLE

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / SPECIAL ITEMS

City of Royal Oak, including all elected & appointed officials, all employees & volunteers, all boards, commissions and/or authorities and their board members, employees and volunteers are additional insureds.

CERTIFICATE HOLDER City of Royal Oak Attn: Chief of Police 211 Williams St Royal Oak MI 48068	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
	AUTHORIZED REPRESENTATIVE