United States Department of the Interior

NATIONAL PARK SERVICE
Mojave National Preserve
2701 Barstow Road
Barstow, California 92311

APPLICATION REQUIREMENTS for a COMMERCIAL FILMING/STILL PHOTOGRAPHY PERMIT

In response to your inquiry concerning Commercial Filming/Still Photography, enclosed is a long-form Application Worksheet for you to complete and return to us. It is important that the worksheet be as detailed as possible concerning your proposed activity. For example, we must know where you propose to stage your film/photography shoot, the size of crew including models or actors, what type of equipment (sets and/or props) you will use, *and* any special provisions you may have.

If you are not familiar with the area, it is advisable to make an advance-scouting trip for routes and/or locations. You will not be permitted to arrive and then select routes/locations on the day of the event. You will need to attach a copy of advertisements, flyers, brochures, and all information sent to participants.

The information on the worksheet will be utilized by National Park Service (NPS) staff to evaluate the impact of your activities on park resources and visitors, appropriate level of monitoring required, and any additional costs associated with your request. It may require several weeks to review your request and render a decision.

FEES: A non-refundable application fee of $111.00 is required from all applicants, regardless of whether or not the permit is issued. This payment must accompany the permit worksheet.

The NPS has the authority to recover any or all of the costs associated with commercial filming/still photography activities. These costs include:

Administrative processing – starting at $391.00
Monitoring costs – minimum of two hours at $45.00/hour
Location fees – to be determined based on type of activity, size of crew, and number of days

INSURANCE: If your request is approved, a Certificate of Insurance will be required showing that you have general liability insurance coverage of $1,000,000. This certificate must name the **United States of America** as "additional insured." Other coverage limits may be required based on the requested activity. If required, we will need an **original** certificate of insurance for our files. The permit holder's name must be on the Certificate of Insurance.

BONDS: A performance bond may also be required. The amount of the bond will be determined from the information provided on the worksheet. It may be paid by bond or cashier's check. This bond will be returned to you upon completion of your activity if all stipulations have been met and park resources have not been damaged.

Please submit the enclosed Application Worksheet and your application fee (payable to the National Park Service) via to the address below. You may post, email or fax the worksheet to:

National Park Service
Mojave National Preserve
Attention: Special Use Permits
2701 Barstow Road
Barstow, CA 92311

tel: (760) 252-6107
fax: (760) 252-6174
email: moja_sup@nps.gov

PAYMENTS: Payment of the application fee must be received before an application can be processed.

- If paying by check, submit payment with the application. Checks are to be made to the **National Park Service**.
- If paying by credit card, submit the application, then contact Mojave National Preserve for a permit number. This number is required when making credit card payments at www.pay.gov.

NPS Form 10-931
OMB No. 1024-002
NEW 10/00
Expires 6/30/2013

National Park Service
Mojave National Preserve
2701 Barstow Road
Barstow, CA 92311
(760) 252-6107

Application for Commercial Filming/Still Photography Permit

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information.** Allow **AT LEAST** four (4) business days for processing. A non-refundable processing fee should accompany this application unless the requested use is an exercise of a First Amendment right. You will be notified of the disposition of the application and the necessary steps to secure your final permit. Your permit may require the payment of cost recovery charges, a location fee, and proof of liability insurance naming the United States of America as also insured.

Applicant:	Company:
Social Security #:	Tax ID #:
Street/Address:	Street/Address:
City/State/Zip Code:	City/State/Zip Code:
Telephone #:	Telephone #:
Cell phone #:	Cell phone #:
Fax #:	Fax #:
E-mail:	E-mail:

Project name:	Producer:
Location manager:	Photographer:
Telephone #:	Director:
Cell phone #:	Insurance company:
E-mail:	

TYPE OF PROJECT:

☐ Stills, editorial ☐ Stills, advertising ☐ Stills, other ☐ Stock photo/ video/film

☐ Feature Film/ TV Movie ☐ TV Series/Pilot ☐ Documentary/ Travelogue ☐ Commercial

☐ Music Video ☐ Infomercial ☐ Industrial ☐ Public Service Announcement

☐ Other, explain: _____

Will there be sound recording? ☐ Yes ☐ No Night work: ☐ No ☐ Yes, explain

Detailed description of on-site activities _____

_____

_____

_____

_____

_____

_____

Talent comprises anyone in front of the camera and includes, but is not limited to, actors, hosts, correspondents, presenters, park visitors, cooperators, volunteers, National Park Service and concessioner staff, etc.

Do you intend to utilize talent? ☐ Yes ☐ No

If yes, provide a full description of who they are and how they will be utilized:

_____

_____

_____

_____

_____

LOCATION SCHEDULE:

DATE	LOCATION	Start Time	End Time	Interior or Exterior	Film Strike Prep	# of cast & crew*

***number in this column should include all individuals present at the location**

How will individuals with access to the site be identified? (Identification tags are recommended.)

_____

Electrical needs, explain

_____

Generator: ☐ No ☐ Yes, size _____ Lighting: Yes (explain) ectors only Yes (explain)

Road Use: _____ Date/time: _____

Road closure requested? ☐ No ☐ Yes

Running shots Driving shots Drive-bys Tow shots Drive-ups & Away Wet down road

Camera/Equipment on Road Shoulder Camera/Equipment on median Other (explain)

_____

_____

_____

OPERATIONAL INFORMATION:

Vehicles:

Personal Cars	Large Trucks	Other Trucks	Vans	Motor homes

Semi-Tractor Trailers	Camera Car	Picture Cars	Dressing Rooms	Other Vehicles (explain)

_____

Large or oversized vehicles may not be able to be accommodated or additional steps may need to be taken to ensure that no damage to park resource occurs.

Vehicles to be parked on or need access to park property (attach additional sheets if necessary):

MAKE	MODEL	COLOR	STATE	LICENSE PLATE #

Base Camp location (attach diagram if necessary): _____

CATERING INFORMATION:

Catering Co. Name _____ Phone Number _____

On-site Manager _____ Food License Information: _____

Equipment: _____

SPECIAL ACTIVITIES:

Children: ☐ None Yes, # of Children ___ Age Range _____

Animals: ☐ None Yes (explain) _____

Trainer Name: _____ Phone #: _____

Aircraft: No Yes (explain) _____

Special Effects: (identify) _____

Effects Technician Name: _____ Phone # _____

License # (if applicable) _____ Permit # (if applicable) _____

Stunts: (explain) _____

Coordinator _____ Phone # _____

Any other unusual or hazardous activities? Explain _____

_____

_____

_____

Are you familiar with/ have you visited the requested area?	☐Y	☐N
Have your obtained a permit from the National Park Service in the past? (If yes, provide a list of permit dates and locations on a separate page.)	☐Y	☐N
Do you plan to advertise or issue a press release before the event?	☐Y	☐N

ATTACH ADDITIONAL PAGES FOR INFORMATION NEEDED TO EVALUATE YOUR PERMIT REQUEST INCLUDING: set construction, parking, sanitary facilities, crowd control, emergency medical plan, off-road activity, trail use, or use of any building and site clean up. Include a proposed Site Plan(s).

CONTACTS:

Person on location responsible for adherence to all terms & conditions of the permit:

Name: _____ Title: _____

Phone: _____ Cell Phone: _____

Person on location responsible for coordinating activities with the NPS:

Name: _____ Title: _____

Phone: _____ Cell Phone: _____

Person at the company office to contact for follow up information and billing:

Name: _____ Title: _____

Phone: _____

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I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Signature _____ **Title** _____ **Date** _____

Company Name _____

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Information provided will be used to determine whether a permit will be issued. Completed application must be accompanied by an application fee in the form of a cashiers check or money order in the amount of $111.00 made payable to **National Park Service**. Credit card payments may be accepted at some parks. Application and administrative charges are non-refundable. *This completed application should be mailed to Special Park Uses Coordinator at the Park address found on the first page of this application.*

Note that this is an application only, and does not serve as permission to conduct any use of the park. If your request is approved, a permit containing applicable terms and conditions will be sent to the person designated on the application. The permit must be signed by the responsible person and returned to the park prior to the event for final approval by the Park Superintendent.

NOTICES

Privacy Act Statement: The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required by this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number or activities subject to collection of fees by the National Park Service (31 U.S.C. 7701) Information from the application may be transferred to appropriate Federal, State, local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

Paperwork Reduction Act Statement): This information is being collected subject to the Paperwork Reduction Act (44 U.S.C. 3501) to allow the park manager to make a value judgment on whether or not to allow the requested use. All applicable parts of the form must be completed. A Federal agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

Estimated Burden Statement: Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any aspects of this form to the National Park Service, Special Park Uses Program Manager, 1849 C Street NW (2460), Washington, D.C. 2024