



TOWN OF RHINEBECK
FILMING PERMIT APPLICATION
 COMPLETED APPLICATION SHOULD BE SUBMITTED AT LEAST 20 DAYS PRIOR TO FILMING

APPLICANT or SITE MANAGER CONTACT INFORMATION

Name: _____

Mailing Address: _____

Telephone: _____ Cell Phone: _____

Email: _____

Name of Filming Company: _____

Film Location: _____

Parking Location: _____

Number of people per day (cast and crew): _____

DATE(s) for SET UP: _____ DATE(s) for FILMING: _____

*Time of filming: START: _____ FINISH: _____

Filming in residential areas shall be permitted Monday – Friday between the hours of 7 am and 9 pm including set up and clean up

Description of Film (use back of sheet if needed):

Statement:

I have read the Town of Rhinebeck Filming Policy and agree to adhere to the regulations of the filming policy and ALL Local/State/Federal Laws and enforcement:

Please sign and Print: _____

PERMIT _____ APPROVED _____ DENIED _____		
BY: _____ Town Supervisor	Date: _____	
BY: _____ Town Clerk	Date: _____	
Fee Paid: _____ Escrow: _____ Certificate of Insurance: _____		

PLEASE BE ADVISED THAT THE TOWN OF RHINEBECK RESERVES THE RIGHT TO CANCEL ANY SPECIAL EVENT DUE TO CIRCUMSTANCES BEYOND ITS CONTROL, INCLUDING BUT NOT LIMITED TO EMERGENCIES, NATURAL DISASTERS AND STORMS.