



San Bernardino County Fire Department

Victorville Division

14343 Civic Drive
PO Box 5001
Victorville, CA 92393-5001
(760) 955-5227
Fax (760) 269-0020
www.victorvilleca.gov

Application for Film Permit

FILM / LOCATION INFORMATION

Film Location: _____

Project Title: _____ Project Type: _____

Film Dates: _____ Film Hours: _____ No. of Days: _____ No. of Personnel: _____

Description of Activities: _____

Materials (FX or pyrotechnic) to be used (include quantity and type): _____

Special Effects Coordinator: _____ California License Number: _____

UPM: _____ Location Manager: _____

APPLICANT INFORMATION

Applicant Name: _____ Phone No.: _____

Fax No.: _____ Email: _____

COMPANY INFORMATION

Company Name: _____

Mailing Address: _____
Street City State Zip Code

Please select the applicable film type below:

FILM PERMIT			
<input type="checkbox"/> Film Permit – With Hazards	\$340.00 first hour \$204.00 each add'l hour	<input type="checkbox"/> Film Permit – General	\$88.00
		<input type="checkbox"/> Technology Fee	4.8% of the listed fees

As the sponsor's designated contact person / agent, I have reviewed and completed this application and declare under penalty of perjury under the laws of the State of California, that all statements are accurate, complete, and true.

Applicant Name: _____ Signature: _____ Date: _____