



**FLORIDA DEPARTMENT OF ENVIRONMENTAL PROTECTION**

**Division of Recreation and Parks**

**Application - Photography Permit for Photography, Videography and Cinematography**

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information.** Allow **AT LEAST** seven (7) business days for processing. A non-refundable processing fee should accompany this application that will be deducted from the total assessed fee, which is based on the Florida State Parks Fee Schedule and Market conditions. You will be notified via telephone or email about the status of your application, and the necessary steps you will need to take to secure your final Photography Permit. Your Photography Permit will require a fee, and proof of liability insurance, as required by the Park Manager, naming the Florida Department of Environmental Protection and the Board of Trustees of the Internal Improvement Trust Fund of the State of Florida as additional insured.

Park Name: \_\_\_\_\_

**Applicant:**

- Individual     Corporation     LLC     Fictitious Name     Nonprofit

Company Name: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Social Security Number: \_\_\_\_\_

FEIN: \_\_\_\_\_

Principal Street Address: \_\_\_\_\_

City: \_\_\_\_\_

County: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_

Cell Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

Webpage: \_\_\_\_\_

**Project:**

Project Name: \_\_\_\_\_



- Type of Project:  Editorial Stills     Advertising Stills     Other Stills
- Stock/Photo/Video/Film     Feature Film/TV Movie     TV Series/Pilot
- Documentary/Travelogue     Commercial     Music Video     Infomercial
- Industrial     Public Service Announcement
- Other, Explain: \_\_\_\_\_

Sound recording (Select One)     Yes     No

Night work (Select One):     Yes     No

Producer: \_\_\_\_\_

Location Manager: \_\_\_\_\_

Photographer: \_\_\_\_\_

Director: \_\_\_\_\_

Telephone #: \_\_\_\_\_

Telephone # - on site: \_\_\_\_\_

Cell Phone # - on site: \_\_\_\_\_

Billing Contact: \_\_\_\_\_

Billing Contact Telephone #: \_\_\_\_\_

Caterer, Company Name: \_\_\_\_\_

Caterer, On-site Manager: \_\_\_\_\_

Caterer, On-site Manager Telephone #: \_\_\_\_\_

Security, Company Name: \_\_\_\_\_

Security, On-site Manager: \_\_\_\_\_

Security, On-site Manager, Telephone #: \_\_\_\_\_



**Summary of Activities and Scene(s):**

Provide a narrative including information about talent, which is anyone in front of the camera and includes but is not limited to: actors, hosts, correspondents, presenters, park visitors, cooperators, volunteers, Florida Park Service staff, park Concessionaire, and the like.

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)

**Schedule by Location(s) including filming, parking and base camp:**

Date	Park Location	Start Time	End Time	Type of Activity (e.g., film, prep or strike)	Number of Crew & Cast

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)

**Description of Equipment/Props:**

Provide a narrative describing the type of equipment (excluding vehicles) and props that are proposed for use at the park, and include information about electrical needs; generator needs; lighting needs; and other utility needs, including but not limited to: garbage collection, garbage disposal, internet access, water, and the like.

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)



**List of vehicles:**

Provide a narrative including information about the type of vehicles that will be parked or will need access to park property, including but not limited to: personal cars, large trucks, vans, motor homes, semi-tractor trailers, camera car, picture car, dressing rooms, or other, please explain. Large or oversized vehicles may not be able to be accommodated or additional steps may be needed to be taken to ensure that no damage to park resources occurs.

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)

**Vehicles to be parked on or need access to park property:**

Vehicle Make and Model	License Number

**Use of Roads and/or Trails?**

Yes    No

Provide a narrative of the proposed use, and include information about the type of vehicles that will be used.

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)



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**Additional Information/Activities:**

Children:  Yes  No

Animals:  Yes  No

Animal Trainer Name: \_\_\_\_\_

Animal Trainer Name Telephone Number: \_\_\_\_\_

Aircraft:  Yes  No

Special Effects:  Yes  No

Special Effects Technician Name: \_\_\_\_\_

Stunts:  Yes  No

Stunts Coordinator Name: \_\_\_\_\_

Any other unusual or hazardous activities?  Yes  No

If you answered yes to any of the above, please provide a narrative about the activities, and include contact information, including telephone numbers for the Animal Trainer, the Special Effects Technician, the Stunts Coordinator, and the name and telephone number of any other crew that is directly related these activities.

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)

**Have you obtained a Photography Permit from the Division of Recreation and Parks in the past?**

Yes  No



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**Do you plan to advertise or issue a press release before the event?**

Yes     No

If you answered yes to any of the above, please provide a narrative about the marketing activities, and include a list of prior awarded Photography Permit dates and locations.

(Attach additional pages if necessary, allow for user to upload from computer a Word or PDF document, and attach to this application)

Prior to commencement of activities under this Photography Permit, the Permittee shall provide to the Department copies of all local, state, and federal licenses and permits required to conduct the activities that will be conducted under this Photography Permit.

I hereby confirm, and 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 entity and the project described above. I understand that the submission of this application does not guarantee the award of a Photography Permit with the Division of Recreation and Parks, and the information provided in this application 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 cashier's check or money order in the amount of \$10.00 made payable to the Florida Department of Environmental Protection. Application charges are non-refundable. By submitting this application, I agree to the above stated terms and conditions.

**Date:** \_\_\_\_\_

**Name:** \_\_\_\_\_

**Signature:** \_\_\_\_\_

**Title:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_



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**For Office Use Only**

Park Manager approval of the exact location in the park for photography or filming?

Yes     No

Park Manager comments about location:

Park Manager approval of activity?

Yes     No

Park Manager, comments and/or modifications to the activity?

Park Manager Signature: \_\_\_\_\_

Date: \_\_\_\_\_

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