



PERRIS TRANSPORTATION DEPARTMENT

Fee: _____

ROAD ENCROACHMENT PERMIT APPLICATION

PLEASE PRINT OR TYPE

COMPANY NAME

DATE(S) OF ACTIVITY

PERMITTEE NAME

ACTIVITY START TIME

TITLE

ACTIVITY END TIME

MAILING ADDRESS

OFFICE NUMBER

CITY

STATE

ZIP CODE

CELL NUMBER

PERMITTEE SIGNATURE

PLEASE INDICATE WHICH CITY ROAD(S) YOU WILL UTILIZE DURING THIS SHOOT (INCLUDE A MAP SHOWING YOUR LOCATION):

PLEASE INDICATE SPECIFIC ACTIVITIES TO BE PERFORMED

Issuance of permit WILL be in conjunction with an approved City Film Permit

PERMITTEE AGREES TO INDEMNIFY THE CITY, ITS OFFICERS, AGENTS, CONTRACTORS, EMPLOYEES, AND VOLUNTEERS AGAINST AND HOLD THEM HARMLESS OF AND FROM ALL CLAIMS AND LIABILITIES OF ANY KIND ARISING OUT OF, IN CONNECTION WITH, OR RESULTING FROM NEGLIGENCE ON PART OF PERMITTEE, ITS OFFICERS, AGENTS, CONTRACTORS, EMPLOYEES, AND VOLUNTEERS IN CONNECTION WITH WORK UNDERTAKEN UNDER THIS PERMIT, AND DEFEND CITY AND ITS OFFICERS, AGENTS, CONTRACTORS, EMPLOYEES, AND VOLUNTEERS FROM ANY SUITS OR ACTIONS AT LAW OR IN EQUITY FOR DAMAGES, AND PAY ALL COURT COSTS AND COUNSEL FEES.

WILL THERE BE ANY PYROTECHNICS? (circle one) YES NO

WILL THERE BE ANY STUNTS/WEAPONS? (circle one) YES NO

If yes to either of the above, an approved Special Effects and Hazardous Conditions Worksheet is required

FOR CITY USE ONLY

_____ Officers needed as follows: _____

Traffic Control Devices recommended: _____

RIVERSIDE COUNTY SHERIFF APPROVAL

AUTHORIZED SIGNATURE

PRINT NAME

PHONE NUMBER

OFFICE IN CHARGE OF FILMING ACTIVITY

PRINT NAME

PHONE NUMBER

CELL NUMBER