



PO Box 64, Crestone, CO 81131 • (719) 256-4313 • crestonetownoffice@gmail.com

**Film Production Application**

- Applicant must be eighteen (18) years of age or older
- Filming permits do not include traffic control or street closure permission
- Application must be completed in its entirety and submitted to the town clerk a minimum of fifteen (15) days prior to the requested filming date
- All Town of Crestone property must remain open to the public at all times
- All trash and debris must be removed immediately after filming
- The Town of Crestone reserves the right to charge a fee for the use of town property and/or resources

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

Organization/Group Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Physical Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_

Location of Requested Filming: \_\_\_\_\_

\_\_\_\_\_

Date(s) and Time(s) of Requested Filming: \_\_\_\_\_

\_\_\_\_\_

What will be filmed?: \_\_\_\_\_

\_\_\_\_\_

Is this requested street closure part of a planned event? Yes  No

If yes, please describe the event and when it is scheduled to be held: \_\_\_\_\_

\_\_\_\_\_

*(See reverse side of this form for signature line)*

**I hereby agree to indemnify the Town of Crestone, its officers, agents and employees, and to hold them harmless as to any claim, liability or damages, including attorney fees and court costs arising out of, or directly or indirectly resulting from the conduct of the above event. I further understand that the above use conditions must be adhered to.**

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

Name (Printed): \_\_\_\_\_

**ADMINISTRATIVE USE ONLY:**

Request Received by: \_\_\_\_\_ Date: \_\_\_\_\_

Application approved?: Yes  No

Clerk Signature: \_\_\_\_\_ Date: \_\_\_\_\_