



# SAN RAFAEL

THE CITY WITH A MISSION

## BUSINESS LICENSE APPLICATION - FILM

PLEASE TYPE OR PRINT CLEARLY

1400 Fifth Avenue  
San Rafael, CA 94901  
Phone: (415) 485-3051  
Fax: (415) 485-3100

**Official Use Only**

Business License No. \_\_\_\_\_

Expiration Date \_\_\_\_\_

**Business Name** \_\_\_\_\_

**Owner Name** \_\_\_\_\_

**Business Location** \_\_\_\_\_

(not P.O. Box)

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Bus. Phone** ( ) \_\_\_\_\_ **Bus. Fax** ( ) \_\_\_\_\_

**Mailing Address** \_\_\_\_\_

(if different)

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Ownership:**  Corporation  LLC  LP  Partnership  Sole Proprietor  Trust

**Tax Status:**  For Profit  Non-Profit

**Federal I. D. No.** \_\_\_\_\_ **State I. D. No.** \_\_\_\_\_

**Proof of non-profit status required**

**CONFIDENTIAL INFORMATION - OWNER/PARTNER/CORPORATE OFFICER & LOCAL CONTACT**

**Owner Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Cell Phone** ( ) \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Driver License No.** \_\_\_\_\_ **Social Security No.** \_\_\_\_\_

**LOCAL CONTACT:**

**Name** \_\_\_\_\_ **Title** \_\_\_\_\_ **Phone** ( ) \_\_\_\_\_

**Home Address** \_\_\_\_\_ **Cell Phone** ( ) \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Driver License No.** \_\_\_\_\_ **Social Security No.** \_\_\_\_\_

Payment can be made using most major credit cards. If you choose, please provide the following information and mail or fax with your completed application. Fax No. (415) 485-3100

**Cardholder Name** \_\_\_\_\_ **Card Type** \_\_\_\_\_

**Cardholder Number** \_\_\_\_\_ **Expiration Date** \_\_\_\_\_

Please contact the San Rafael Police Department and the Fire Inspection Division regarding any necessary permits.

**Date and Time of Filming** \_\_\_\_\_

**Location/Address of Filming** \_\_\_\_\_

**TAX:** \$300 PER DAY (Public Property)  
\$200 PER DAY (Private Property)

**No. of Days** \_\_\_\_\_ @ \$ \_\_\_\_\_ per day

**DISABILITY ACCESS FEE:** \$1.00  
(unless tax-exempt)

**No. of Employees**

Part Time	Full Time
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**TOTAL AMOUNT DUE** \$

**NOTE:** A copy of insurance coverage for \$2,000,000 naming the City of San Rafael as additionally insured must be provided.

I declare under penalty of perjury that to the best of my knowledge the information contained above is true and correct.

**Legal Signature** \_\_\_\_\_ **Title** \_\_\_\_\_

**Print Name** \_\_\_\_\_ **Date** \_\_\_\_\_

*Thank you for doing business in the City of San Rafael!*

# GENERAL REQUIREMENTS & INFORMATION



**SAN RAFAEL**  
THE CITY WITH A MISSION

**Business Licenses**  
Phone: (415) 485-3051  
Fax: (415) 485-3100

**Business License Tax Required for Filming in City:**

Public Property:	\$300 per day
Private Property:	\$200 per day
Public and Private (same day):	\$300 per day

**Advance Notice**

- Minimum for simple project **without** road closures or special or major effects (FX)
**One Week**
- Minimum for project **with** large scale activities such as major FX or road closures
**Three Weeks**

**Police Requirements & Fees**

Contact: Traffic Sergeant  
(415) 485-3034

**Fire Requirements & Fees**

Contact: Fire Prevention & Inspection  
(415) 485-3308

**Insurance Requirements**

Commercial general liability policy (with endorsement naming City of San Rafael as additional insured) in the amount of \$1 million per occurrence, \$2 million aggregate

**Disability Access**

Under federal and state law, compliance with disability access laws is a serious and significant responsibility that applies to all California building owners and tenants with buildings open to the public. You may obtain information about your legal obligations and how to comply with disability access laws at the following agencies:  
 The Division of the State Architect at [www.dgs.ca.gov/dsa/Home.aspx](http://www.dgs.ca.gov/dsa/Home.aspx).  
 The Department of Rehabilitation at [www.rehab.cahwnet.gov](http://www.rehab.cahwnet.gov).  
 The California Commission on Disability Access at [www.cdda.ca.gov](http://www.cdda.ca.gov).

• DIRECTORY OF ADDITIONAL INFORMATION •

CITY OF SAN RAFAEL	BUSINESS INFORMATION	CLOSEST AIRPORT
<p><b>Event Coordinator</b> Brian Auger Phone: (415) 485-3465 <a href="http://www.sanrafaelfilm.com">www.sanrafaelfilm.com</a></p> <p><b>City Manager</b> Jim Schutz Phone: (415) 485-3075</p> <p><b>City Mayor</b> Gary Phillips Phone: (415) 485-3074</p> <p><b>Parking Services</b> Phone: (415) 458-5333</p>	<p><b>Chamber of Commerce</b> Phone: (415) 454-4163 Fax: (415) 454-7039</p>	<p><b>San Francisco (SFO)</b>  15 Miles</p>
		<p><b>Marin County Visitors Bureau</b> (866) 925-2060</p>