



City of Anniston Film Permit Application

Thank you for choosing Anniston for your production. Please complete this form and submit it to the City Manager's Office for review at least 3–5 business days before your planned filming date. Incomplete or illegible applications will not be accepted.

SECTION 1: Production Information

- Production Title: _____
- Production Type:
 - Film TV Commercial Other: _____
- Production Company Name: _____
- Primary Contact Name: _____
 - Title: _____
 - Phone: _____
 - Email: _____

SECTION 2: Location Details

- Filming Date(s): _____
 - Filming Times: Start: _____ End: _____
 - Location Address/Description: _____
 - Additional Locations (if any): _____
- (Separate applications are required for multiple locations on the same day.)
- Base Camp Location: _____
 - Crew Parking Location: _____

SECTION 3: Filming Details

- Nature of Filming Activities:

Low Impact High Impact (requires additional approvals)

- Details (e.g., lighting, noise, traffic, parking, special effects):

- Will there be street closures? Yes No

- If yes, provide detailed traffic control plans (attach documents).

- Will there be special effects (e.g., pyrotechnics, smoke, explosions)? Yes No

- If yes, attach Anniston Fire Department approval.

SECTION 4: Notification

- Date Residents/Businesses Notified: _____

- Notification Area Radius: 1 block 2 blocks Other: _____

- Attach proof of notification (letters, signatures, or other documentation).

SECTION 5: Insurance and Financial Requirements

- Insurance Certificate Provided: Yes No

(Required minimum: \$1,000,000 for General, Auto, and Worker's Comp Liability)

- Security Bond or Deposit (\$5,000): Yes No

SECTION 6: Additional Information

- Number of Crew Members: _____

- Number of Vehicles: _____

- Equipment Description: _____

- Additional Services Required:

Police Fire Public Works Other: _____

ACKNOWLEDGEMENT AND SIGNATURE

I, the undersigned, acknowledge that I have read and understand the City of Anniston's Film Guidelines and agree to comply with all requirements, including notification, traffic control, and permit conditions. I understand that failure to comply may result in permit revocation.

• Name: _____

• Signature: _____

• Date: _____

FOR CITY USE ONLY

• Date Received: _____

• Permit Number: _____

• Approval Date: _____

• City Manager Approval: _____

• Police Department Approval (if applicable): _____

• Fire Department Approval (if applicable): _____

• Comments/Conditions: _____