



Economic Development
Film Office

San Bernardino County Film Office Standard Permit Forms

- ✓ Certificate of Insurance (COI)
- ✓ Letter of Endorsement (LOE)
- ✓ Private Property Approval Form (*required for **each** location*)
- ✓ Waiver of Subrogation Rights
- ✓ County Credits Agreement

For more information, including permit processing times and
frequently asked questions, please visit
www.SelectSBCounty.com



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San Bernardino County Film/Photo Permit Insurance Requirements
Pursuant to San Bernardino County Film Ordinance No. 41.24, § 41.2411

GENERAL REQUIREMENTS (FOR ALL PERMITS)

Prior to the issuance of a film or photo permit, applicants are required to submit valid Certificates of Insurance and corresponding Endorsements to the San Bernardino County Film Office. All such documents, along with any additional materials required, must be uploaded through the County's [EZ Online Permitting \(EZOP\) Portal](#).

REQUIRED FORMS

- Private Property Approval (for each filming location) ➤ Page 3
- Waiver of Subrogation Rights ➤ Page 4
- County Credits Agreement ➤ Page 5

REQUIRED FORMS, IF APPLICABLE

The following forms can be found, as needed, at: <https://selectsbcounty.com/film/>

- Workers' Compensation Waiver
- Vehicle Liability Waiver

For more information and examples of the other required documents listed below, please refer to the appendix beginning on page 6.

FORMS THAT MUST BE PROVIDED

- Certificate of Insurance (COI) ➤ Page 6
- Letter of Endorsement (LOE) ➤ Page 7



San Bernardino County Film Office Permit Addendum Property Owner Permission Form

If you are shooting on private property, either "A" or "B" must be completed and signed.

A. PROPERTY OWNER

I, _____ hereby certify under penalty of perjury that I am the legal owner of the property located at, _____

and that I consent to the photographic recordings occurring on said property on _____

with _____ Production Company.

Signature Date Phone Number

Mailing Address APN

B. LEGAL REPRESENTATIVE

I, _____ of _____

hereby certify that I am the owner's legal agent for the property located at _____

_____ and that _____ (owner) consents

to the photographic recordings occurring on said property on _____

with _____ Production Company.

Signature Date Phone Number

Mailing Address APN



Waiver of Subrogation Rights

Permittee waives all claims against the County, its officers, agents and employees, for loss or damages caused by, arising out of, or in any way connected with the exercise of right of entry and use under this permit except for the sole negligence of the County, its officers, agents or employees.

Permittee agrees to indemnify, defend with counsel reasonably approved by County) and hold harmless the County and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages and/or liability arising out of activity related to the issued permit from any cause whatsoever, including the acts, errors or omissions of any person and for any costs or expenses incurred by the County on account of any claim except where such indemnification is prohibited by law. This indemnification provision shall apply regardless of the existence or degree of fault of indemnitees. The Permittee's indemnification obligation applies to the County's "active" as well as "passive" negligence but does not apply to the County's "Sole negligence" or "willful misconduct" within the meaning of Civil Code Section 2782.

Permittee shall be solely responsible and liable for any damage to natural resources, equipment, structures, personal property, or persons caused by, arising out of, or in any way connected with the exercise of the rights granted to

Permittee Info

Name: _____

Cellphone: _____

Email: _____

Signature: _____

Date: _____

Production Company Info:

Company Name: _____

Company Address: _____

Company Phone: _____

On-Site Contact Info:

Name: _____

Cell Phone: _____

Email: _____



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Credits Agreement

I _____ am duly authorized to represent _____
(First and Last Name – Please Print) (Production Company Name Please Print)

and agree to provide the following to the San Bernardino County Film Office:

- One (1) copy of the finished product in one of the following formats:
 - DVD for motion (i.e. feature, TV, video, commercial, etc.)
 - CD and/or PRINT COPY for stills (i.e. digital photos, issue of magazine, issue of catalog, etc.)
- Acknowledgement through the film credits for portions shot in the County of San Bernardino. This includes, but is not limited to:
 - Feature Films
 - TV
 - Documentaries
 - Videos (all types)
 - Short Films
 - Student Productions
- The Acknowledgments shall be given as follows:
 - San Bernardino County Film Office

Permittee Signature

Production Company Address

Permittee Name (please print)

City, State, Zip

Title

Office Phone Number

Date

Cell Phone Number

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

ADDITIONAL INSURED – DESIGNATED PERSON OR ORGANIZATION

This endorsement modifies insurance provided under the following:

COMMERCIAL GENERAL LIABILITY COVERAGE PART

SCHEDULE

Name Of Additional Insured Person(s) Or Organization(s):

San Bernardino County, 290 North D Street, Suite 600, San Bernardino, CA 92415, and San Bernardino County and its officers, employees, agents and volunteers are named additional insureds with respect to liabilities arising out of the performance of services hereunder.

Information required to complete this Schedule, if not shown above, will be shown in the Declarations.

A. Section II – Who Is An Insured is amended to include as an additional insured the person(s) or organization(s) shown in the Schedule, but only with respect to liability for "bodily injury", "property damage" or "personal and advertising injury" caused, in whole or in part, by your acts or omissions or the acts or omissions of those acting on your behalf:

1. In the performance of your ongoing operations; or
2. In connection with your premises owned by or rented to you.

However:

1. The insurance afforded to such additional insured only applies to the extent permitted by law; and
2. If coverage provided to the additional insured is required by a contract or agreement, the insurance afforded to such additional insured will not be broader than that which you are required by the contract or agreement to provide for such additional insured.

B. With respect to the insurance afforded to these additional insureds, the following is added to **Section III – Limits Of Insurance:**

If coverage provided to the additional insured is required by a contract or agreement, the most we will pay on behalf of the additional insured is the amount of insurance:

1. Required by the contract or agreement; or
2. Available under the applicable Limits of Insurance shown in the Declarations;

whichever is less.

This endorsement shall not increase the applicable Limits of Insurance shown in the Declarations.