

Nevada Film Office Registration Application

WELCOME TO NEVADA! Thank you for choosing our state as your backdrop. The Nevada Film Office is your 'one-stop filming resource center.'

Your first step:

- ✦ Please fill in the attached Registration Application. Once you have completely filled in the Application, please return it to one of our offices:

Northern Nevada

108 E. Proctor
Carson City, Nevada 89701
(Ph) 775-687-1814/800-336-1600
(Fax) 775-687-4497
Email: ccnfo@bizopp.state.nv.us

Southern Nevada

555 E. Washington Ave., Ste. 5400
Las Vegas, Nevada 89101
(Ph) 702-486-2711/877-638-3456
(Fax) 702-486-2712
Email: lvnfo@bizopp.state.nv.us

Your next step:

- ✦ Once your registration has been approved, you will need to submit an application package to each appropriate jurisdiction. The application package consists of the following:
 - ✦ Approved Registration Application
 - ✦ Location Form for each Filming Jurisdiction
 - ✦ Signed Hold Harmless Agreement for each Jurisdiction
 - ✦ Traffic Plans (if applicable)
 - ✦ Pyrotechnic Plans (if applicable)
 - ✦ Proof of Insurance

Notes:

- ✦ Projects using pyrotechnics require a written plan submitted to the **Fire Department ten (10) working days** before filming.
- ✦ **All** Pyrotechnic Coordinators must be licensed by the State Fire Marshall.
- ✦ Applications for street closure(s) must be submitted to the appropriate entity **five (5) working days** prior to filming.
- ✦ Applications for filming projects for NON-environmentally sensitive areas with no pyrotechnics or street closures in Las Vegas/Clark County area must be submitted at least **three (3) working days** in advance.
- ✦ Applications for filming projects with no pyrotechnics or street closures in Reno/Lake Tahoe area must be submitted at least **three (3) working days** in advance.
- ✦ A signed **Hold Harmless Agreement** must be submitted to each jurisdiction.
- ✦ Each jurisdictional entity involved must be named as **additional insured** (not certificate holder) and provide a proof of **General Liability Insurance**. (Check with each jurisdiction as they may vary in amounts.)
- ✦ All applicants must comply with the Nevada industrial insurance regulations (via Payroll Services).
- ✦ All applicants are required to pay any additional fees that are applied by each individual jurisdiction; fuel taxes and or permit fees may later be required through the Department of Motor Vehicles. For specifications, please contact Cindy Arnold at 775-684-4648.

THIS IS NOT A FILM PERMIT

NFO Office Use Only

Date Received: _____

Received By: _____

Registration #: _____

Nevada Film Office Registration Application

Check entity where you plan to Shoot

- | | |
|------------------------------------|-------------------------------------|
| <input type="checkbox"/> Clark Co. | <input type="checkbox"/> Carson |
| <input type="checkbox"/> Las Vegas | <input type="checkbox"/> Reno |
| <input type="checkbox"/> Parks | <input type="checkbox"/> Sparks |
| <input type="checkbox"/> Highway | <input type="checkbox"/> Washoe Co. |
| <input type="checkbox"/> Federal | _____ |
| <input type="checkbox"/> Rural Co. | _____ |
| <input type="checkbox"/> Other | _____ |

Application Date: _____

Production Title: _____

Type of Project: (check one)

- | | | | | |
|---------------------------------------|---|--|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Feature Film | <input type="checkbox"/> TV Movie | <input type="checkbox"/> TV Series/Special | <input type="checkbox"/> Still Photo | <input type="checkbox"/> Music Video |
| <input type="checkbox"/> Documentary | <input type="checkbox"/> Industrial/Corp. | <input type="checkbox"/> Commercial | <input type="checkbox"/> Educational | <input type="checkbox"/> Other _____ |

Date(s) of Project: _____ Estimated # of **shooting** days: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

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Primary Contact/Location Manager: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

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Payroll Services: _____

Address: _____

Telephone: _____ Fax: _____ Approx # of Employees: _____

Liability Insurance Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Fax: _____

Policy #: _____ Exp. Date: _____

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Within thirty (30) days of project completion in Nevada, payment arrangement will be made for all debts and obligations incurred while filming in this state.

Signature of Company Officer: _____
Name
Title
Date

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Registration Authorization: _____
Nevada Film Office
Date

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