


BAYONNE POLICE DEPARTMENT		
TITLE: Police Permit- Filming		
NUMBER OF PAGES: 1	EFFECTIVE DATE: 11 February 2025	

Applicant: Review City Ordinance 25-3, and then complete the following:

Name of Production company or Individual _____

Address _____ City _____ State _____ Zip _____

Email _____ Phone# _____

Applicant _____ Cell Phone # _____

Application date _____

Location of Filming (w/ cross streets) _____

Requested or Anticipated **Event Date(s)** Start _____ End _____

Daily Requested **Start / Finish Times** _____

Is this group a non-profit or not-for-profit organization? No ___ Yes ___
 If yes, attach a copy of your 501(c)(3) incorporation or other exemption. Attached Yes ___

Attach Police Questionnaire and associated documents- Attached Yes ___

Attach Proof of General Liability Insurance Attached Yes ___

Attach a Hold Harmless Attached Yes ___

Attach a copy of an official government identification Attached Yes ___

The undersigned is submitting this request on behalf of the above listed organization or group and certifies that they have read and understand City ordinance 25-3. The undersign further acknowledges that they are responsible for the administration of this event.

Applicant (Print) _____ Applicant (Sign) _____

Applicant - do not write below this point

Date Permit Issued _____ Time _____ Call number _____ - _____

Evaluated by (Print/Sign) _____ Approved by _____

See attached evaluation for full details