



PHOTOGRAPHY & FILMING REQUEST SUPERIOR NATIONAL FOREST

Notice: Required response time to a filming request begins upon receipt of sufficient details to evaluate the effects of the filming activity on National Forest System lands. Please provide detailed narratives below. Attach additional sheets necessary to document all pertinent and required information.

Date:	Project Title:
Company:	Production Date(s) (Include alternative dates):
Authorized Company Representative:	Primary Contact/Title:
Address:	Phone:
Phone:	Backup Contact/Title:
Fax:	Phone:

1. Production Information:

TYPE:					
Still Photography	Commercial	TV Movie	TV Episodic	Feature Film	
Music Video	Corporate Video	Documentary	Other _____		

PROPOSED LOCATION(S)(Including size of area to be used, legal description):
NOTE: Ownership within the Superior National Forest is segmented in areas. It is the responsibility of the applicant to determine if coordination with other agencies or private landowners is necessary.



Total number of people on location:

(include actors, crew members, etc.)

Set Up (date, length of time, time of day)

Production (start/stop dates/time):

Breakdown and restoration (start/stop dates/time)

STUNTS/SPECIAL EFFECTS PROPOSED:			
Pyrotechnics	Hazardous Materials	Riparian Area	Aerial Stunts
Domestic or Wild Animals	Developed Recreation Site	Other:	
Special Request information:			
Wilderness	Use of aircraft (type, time of day, flight pattern). Including drones/Unmanned Aircraft Systems (UAS).		
Weather	Other:		

II. DESCRIPTION OF ACTIVITY:

(Include map of area, proposed ground disturbing activities, attach narratives and story boards of action in full description needed).

Include parking plan (vehicles, equipment, and aircraft)

Include staging plan (dressing rooms, catering, portable restrooms, etc.):



III. DESCRIPTION OF EQUIPMENT:

EQUIPMENT DETAIL(numbers):

_____ GENERATORS _____ CARS _____ TRUCKS _____ RVS
 OTHER _____

Action involving vehicles and/or equipment:

Props proposed:

Traffic and safety control/special closures measures needed: (have you obtained permission to use improvements not owned by/under the jurisdiction of the United States Government, i.e. structures, roadways, etc.)?

Applicants Signature: _____	Date: _____
<p>To be completed by the Forest Service:</p> <p>Fees Photography/Filming Land Use Fee: _____</p> <p>Permit Preparation/Monitoring Cost: _____ (See attached cost recovery worksheets)</p> <p style="text-align: right;">Total Amount: _____</p> <p>Certification of Insurance Received: Yes No</p> <p>Bonding: Required: Yes No Amount: _____ Received: Yes No</p>	<p>Land Use Fee Schedule - 2017</p> <p>Minimum Use Fee: \$50/150.00</p> <p>Still Photography 1-10 people \$50.00/day 11-30 people \$150.00/day 31 or more \$250.00/day</p> <p>Motion Picture & TV production 1-10 people \$150.00/day 11-30 people \$200.00/day 31-60 people \$500.00/day 61 or more \$600.00/day</p>



<p>Concessionaire/Permittee Coordination Required: Yes No</p> <p>Other Landowner/Agency Coordination Required: Yes No</p>	<p>In addition to the above use fee, a minimum \$123.00 will be charged for permit processing. Additional fees may be added depending on permit complexity and monitoring needs.</p> <p>Certificate of Insurance Required See attached insurance requirements</p>
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USDA Forest Service Insurance Requirements

The permit requires public liability insurance (Combined Single Limit) in the amount of \$1,000,000.00. The coverage shall extend to property damage, bodily injury, or death rising out of the holder’s activities under the authorization including, but not limited to, occupancy or use of the land and construction, maintenance, and operating of the structures, facilities, or equipment permitted by this authorization.

The policy shall also contain a specific provision or rider pertaining to cancellation. The statement must read as follows: “Should any of the above described policies be cancelled before the expiration thereof, the issuing insurer will mail 30 days written notice to the certificate holder.”

PLEASE NOTE! If the holder’s insurance company uses a standard insurance form, such as ACORD, the cancellation statement may include the phrases, ...the issuing insurer will endeavor to mail...and ...but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives. These phrases conflict with USDA, Forest Service Special Use Permit authorization and ARE NOT ACCEPTABLE. The holder should contact the insurance agent to have the cancellation statement amended.

The policy must name the United States as “Additional Insured”. There is usually an additional premium for this coverage, which the permit holder must pay.

The certificate holder should read, depending on which district you apply:

<p>Tofte: United States Tofte Ranger District Attn: Special Uses P.O. Box 2159 Tofte, MN 55615</p>	<p>Gunflint United States Gunflint Ranger District Attn: Special Uses 2020 W. Highway 61 Grand Marais, MN 55604</p>	<p>Kawishiwi/Laurentian/LaCroix United States Kawishiwi Ranger District Attn: Special Uses 1393 Hwy 169 Ely, MN 55731</p>
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The holder shall send an authenticated copy of its insurance policy to the Forest Service immediately upon issuance of the policy.



According to the Paperwork Reduction Act of 1995 an agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 0596-0082. The time required to complete this information collection is estimated to average one (1) hour per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. The U.S. Department of Agriculture (USDA) prohibits discrimination in all its programs and activities on the basis of race, color, national origin, age, disability, and where applicable, sex, marital status, familial status, parental status, religion, sexual orientation, genetic information, political beliefs, reprisal, or because all or part of an individual's income is derived from any public assistance. (Not all prohibited bases apply to all programs.) Persons with disabilities who require alternative means for communication of program information (Braille, large print, audiotape, etc.) should contact USDA's TARGET Center at 202-720-2600 (voice and TDD). To file a complaint of discrimination, write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, SW, Washington, DC 20250-9410 or call toll free (866) 632-9992 (voice). TDD users can contact USDA through local relay or the Federal relay at (800) 877-8339 (TDD) or (866) 377-8642 (relay voice). USDA is an equal opportunity provider and employer.

The Privacy Act of 1974(5 U.S.C. 552a) and the Freedom of Information Act (5 U.S.C. 552) govern the confidentiality to be provided for information received by the Forest Service.