

# FILM PERMIT APPLICATION

# THE APPLICATION PROCESS

This package contains the necessary application to apply for a **Film Permit** in the City of Vaughan (the City). To apply, persons must submit a completed application and pay the applicable fee as listed at <u>vaughan.ca/BusinessLicensing</u> as per the Filming By-law posted in the By-law Library. For more information, contact us:

#### By-law and Compliance, Licensing and Permit Services Department, City of Vaughan

Vaughan City Hall, 2141 Major Mackenzie Dr., 1st floor, Vaughan, ON, L6A 1T1

Phone: 905-832-2281 | Email: <a href="mailto:bylaw.licensing@vaughan.ca">bylaw.licensing@vaughan.ca</a>

Website: vaughan.ca/BusinessLicensing

Hours: Monday to Friday, 8:30 am to 4:30 pm, except for statutory holidays

#### Application circulation

Once your application is submitted, it will be circulated to relevant City of Vaughan departments, as well as other reviewing government agencies, such as the Regional Municipality of York and York Regional Police. These departments and agencies may provide feedback with respect to issuing your licence and conditions of your licence.

#### How to apply

Applicants and licensees have four options for submitting new or renewal licence applications:

- Licensing Portal where you can apply online for and renew many licences, posted at vaughan.ca/BusinessLicensing. Note, you will not be required to complete this form if you apply using the portal.
- 2. Mail to the By-law and Compliance, Licensing and Permit Services Department.
- **3. Drop off** to drop-boxes located at the entrances of Vaughan City Hall, with the enveloped marked, "Attn: By-law and Compliance, Licensing and Permit Services".
- **4.** By e-mail to <a href="mailto:bylaw.licensing@vaughan.ca">bylaw.licensing@vaughan.ca</a>, along with scanned copies of required documentation, and an e-mail indicating a contact phone number for staff to collect payment.

#### Who can submit the application and appoint an authorized agent

As per the table below, the following persons can submit an application. Note that an "authorized agent" may submit the application, provided that the person is given authorization through this application or <u>separate submission</u> of the Authorized Agent Form at <u>vaughan.ca/BusinessLicensing</u>.



| Applicant           | Persons who may:  1. submit the application; and                                                                      |  |
|---------------------|-----------------------------------------------------------------------------------------------------------------------|--|
|                     | 2. who have the authority to appoint an authorized agent through submission of this form or the Authorized Agent Form |  |
| Sole proprietorship | The sole proprietor                                                                                                   |  |
| Partnership         | A partner                                                                                                             |  |
| Corporation         | An officer or director                                                                                                |  |

# THE APPLICATION

| THE AFFEICATION                                  |                                                |  |  |
|--------------------------------------------------|------------------------------------------------|--|--|
| Section 1 – Film or Event Information            |                                                |  |  |
| Please indicate the type of film or event you a  | re intending to hold. Note that application    |  |  |
| fees, including deposits, are listed at www.vau  | ghan.ca/businesslicensing.                     |  |  |
| Student filming event                            |                                                |  |  |
| Filming event                                    |                                                |  |  |
|                                                  |                                                |  |  |
| Start and end dates and times                    | Alternate start and end dates and times        |  |  |
| Ex.: 31/12/2020 12 pm to 2/1/2021 12 pm          | Ex.: 14/2/2021 12 pm to 16/2/2021 12 pm        |  |  |
|                                                  |                                                |  |  |
| Film name                                        |                                                |  |  |
|                                                  |                                                |  |  |
| Description of a film                            |                                                |  |  |
| •                                                | y factors that may require additional measures |  |  |
| to mitigate potential health, safety, nuisance a | nd consumer protection concerns, such as       |  |  |
| imitation guns, gunfire, explosives, bombs, flas | h powder, detonators, fire or other weapons.   |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
| Location(s) of filming                           |                                                |  |  |
| Location(5) or mining                            |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |
|                                                  |                                                |  |  |



| Section 2 – Applicant Information                   |                                       |                       |
|-----------------------------------------------------|---------------------------------------|-----------------------|
| The applicant is the entity seeking to obtain the I | permit.                               |                       |
| Registered business name                            | T                                     | ype of applicant      |
| (as per Articles of Incorporation or Master Busine  | ess License)                          |                       |
|                                                     |                                       | Sole proprietor       |
|                                                     |                                       | Partnership           |
|                                                     |                                       | Corporation           |
| Operating business name (if different than regist   | ered business name                    | )                     |
|                                                     |                                       |                       |
| Name (first and last name of the sole proprietor    | in a sole proprietors                 | hip, a partner in a   |
| partnership or a duly authorized director or offic  | er in a corporation)                  |                       |
|                                                     |                                       |                       |
| Address (street no, street name)                    |                                       | Unit                  |
|                                                     |                                       |                       |
| Municipality                                        |                                       | Province              |
|                                                     |                                       |                       |
| Country                                             |                                       | Postal code/ zip code |
|                                                     |                                       |                       |
| Email address                                       | Telephone Numbe                       | er                    |
|                                                     |                                       |                       |
| Mailing address (if different from above)           |                                       |                       |
| Address (street no, street name)                    |                                       | Unit                  |
|                                                     |                                       |                       |
| Municipality                                        |                                       | Province              |
|                                                     |                                       |                       |
| Country                                             |                                       | Postal code/ zip code |
|                                                     |                                       |                       |
|                                                     | · · · · · · · · · · · · · · · · · · · |                       |



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|--------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------|--------------------------------------------|--|--|
| Section 3 – Authorized Agent                                                               |                                                                                            |                                            |  |  |
| This section should be complete                                                            | This section should be completed if the applicant would like to appoint an agent to act on |                                            |  |  |
| behalf on a business licence or p                                                          | ermit applicant(s                                                                          | s) or licensee(s).                         |  |  |
| Name of authorized agent (first                                                            | name, last name                                                                            | :)                                         |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
| Business telephone number                                                                  | Business email                                                                             |                                            |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
| What will the Authorized Agent                                                             | do on behalf of                                                                            | the applicant?                             |  |  |
| Select all activities that apply.                                                          |                                                                                            |                                            |  |  |
| Apply for a permit, including                                                              |                                                                                            |                                            |  |  |
|                                                                                            | •                                                                                          | t to the licence, permit or application    |  |  |
| •                                                                                          | •                                                                                          | ence, permit or application                |  |  |
| Cancel the licence, permit                                                                 | or application                                                                             |                                            |  |  |
| Other, as described here:                                                                  |                                                                                            |                                            |  |  |
| Section 4 – Road Closures and V                                                            | •                                                                                          |                                            |  |  |
|                                                                                            |                                                                                            | d or boulevard, then a deposit must be pai |  |  |
| at the time of application, as per                                                         | •                                                                                          | nts by-law at                              |  |  |
| www.vaughan.ca/businesslicens                                                              |                                                                                            |                                            |  |  |
| Will there a partial or intermitte                                                         | ent road closure                                                                           | ?                                          |  |  |
| No                                                                                         |                                                                                            |                                            |  |  |
| Yes, as described below:                                                                   |                                                                                            |                                            |  |  |
| Is your event intended to be he                                                            | ld on a public roa                                                                         | ad or boulevard?                           |  |  |
| No                                                                                         |                                                                                            |                                            |  |  |
| Yes, at the following locati                                                               |                                                                                            |                                            |  |  |
| Proposed road closure start and                                                            | l end dates                                                                                | Alternate road closure start and end dat   |  |  |
| and times                                                                                  |                                                                                            | and times                                  |  |  |
| Ex.: 31/12/2020 12 pm to 2/1/20                                                            | <b>)21</b> 12 pm                                                                           | Ex.: 31/12/2020 12 pm to 2/1/2021 12 pr    |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
|                                                                                            |                                                                                            |                                            |  |  |
| Section 5 – Other Event Information                                                        |                                                                                            |                                            |  |  |
| 1                                                                                          | • •                                                                                        | review this Building Standards webpage,    |  |  |
| https://www.vaughan.ca/residential/building-and-construction/building-permits/general-     |                                                                                            |                                            |  |  |
| construction-permits/tents, to confirm if a permit is required. If you have any questions, |                                                                                            |                                            |  |  |
| contact Building Standards at <u>buildingstandards@vaughan.ca</u> or 905-832-8510.         |                                                                                            |                                            |  |  |
| Yes                                                                                        |                                                                                            |                                            |  |  |
| No                                                                                         |                                                                                            |                                            |  |  |



### Section 6 – York Region's Form – Food Vendors, Personal Services And Petting Zoos

If you intend to have a film event that includes food vendors, personal services (such as tattooing), or petting zoos, the Regional Municipality of York (York Region) requires organizers to submit a form(s) to them. Visit https://www.york.ca/health/foodsafety/special-events-farmers-markets-and-wild-game-dinners to complete the forms online or download the Region's forms. Please mark one of the following:

I have submitted the required Organizer form to York Region and advised all food vendors and petting zoos that York Region requires that they submit Vendor and Petting Zoos forms to the Region as well.

My event does not involve food vendors, personal services and/or petting zoos.

# Section 7 - Required documents

| The                        | The following documentation must be submitted with your application.              |                                                                                  |  |  |
|----------------------------|-----------------------------------------------------------------------------------|----------------------------------------------------------------------------------|--|--|
| Item                       |                                                                                   | Description                                                                      |  |  |
| Check the box below if inc |                                                                                   | cluded                                                                           |  |  |
|                            | Canadian                                                                          | Canadian government-issued identification which demonstrates                     |  |  |
|                            | Government-                                                                       | the applicant is at least 18 years of age and eligible to work in                |  |  |
|                            | Issued                                                                            | Canada; this is required for all directors and officers in a                     |  |  |
|                            | Identification                                                                    | corporation, partners in a partnership and sole proprietors. This                |  |  |
|                            |                                                                                   | may be one or several pieces of identification.                                  |  |  |
|                            | Business                                                                          | Business Registration Documents (e.g., Master Business Licence,                  |  |  |
|                            | Registration                                                                      | Certificate of Registration, franchise agreement, partnership                    |  |  |
|                            | Documents                                                                         | agreement, or articles of incorporation; if the business' legal and              |  |  |
|                            |                                                                                   | operating name are different, both the Master Business Licence                   |  |  |
|                            |                                                                                   | and Articles of Incorporation are required)                                      |  |  |
|                            | Letter from school                                                                | I If the application is a student, a letter from the school confirming           |  |  |
|                            |                                                                                   | their contact information, that the applicant is a student, and that             |  |  |
|                            |                                                                                   | he or she has permission to make the film described in this                      |  |  |
|                            |                                                                                   | application.                                                                     |  |  |
|                            | Letter to residents                                                               | A letter which will be sent to nearby resident and businesses                    |  |  |
|                            | and businesses, to                                                                | notifying them of the event details, including, but not limited to,              |  |  |
|                            | be distributed at event details, road closures, expected noise, impact on parking |                                                                                  |  |  |
|                            | least 48 hours in                                                                 | ast 48 hours in and on-site location manager information for the duration of the |  |  |
|                            | advance. event.                                                                   |                                                                                  |  |  |
|                            |                                                                                   | Note that filming in residential areas shall be restricted to the                |  |  |
|                            |                                                                                   | local hours of 7 a.m. and 11 p.m.; however, an exemption may be                  |  |  |
|                            |                                                                                   | granted by the City Clerk, provided that all affected residents are              |  |  |
|                            |                                                                                   | notified in writing and subsequently give their written approval.                |  |  |
|                            | Proof of Insurance                                                                | Proof of comprehensive liability insurance for a minimum amount                  |  |  |
|                            |                                                                                   | of \$5,000,000, on the City's standard Certificate of Insurance,                 |  |  |
|                            |                                                                                   | linked to vaughan.ca/BusinessLicensing.                                          |  |  |



| Traffic Control<br>Plan  Emergency Response Plan                                                     | This should include location, route maps, parking layouts, road closures, signs, barricades, security, and any paid duty officer locations (required for events within 30 m of an intersection with signals).  Film events should also include requests for parking for film crews. Contact York Regional Police at for more information about paid duty officers; visit <a href="https://www.yrp.ca/en/index.asp">https://www.yrp.ca/en/index.asp</a> .  This should include plans to protect the public, organizing staff and participants from any identifiable hazards and threats that may occur at the event. This should include approvals from Vaughan Fire and Rescue Services, York Regional Paramedic Services, YRP and details of any paid duty officers, firefighters and paramedics, and their appared routes. |
|------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Noise Attenuation Plan                                                                               | paramedics, and their access routes.  This should include any noise mitigation plans and any Noise Exemption approvals if needed.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| Tent or Stage Site<br>Plan                                                                           | If not included as a sketch or image earlier, it must be included as attachment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| Road Closure Site<br>Plan (if applicable)                                                            | If not included as a sketch or image earlier, it must be included as an attachment.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Approvals for large tents and stages                                                                 | Approvals from the Building Standards department; contact (905)832-8510 for more information.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| Technical Standards & Safety Authority (TSSA) documentation for Amusement Devices                    | This includes a TSSA licence and permits for each ride. Visit <a href="https://www.tssa.org/amusement-devices-licences">https://www.tssa.org/amusement-devices-licences</a> for more information or <a href="https://www.tssa.org/">https://www.tssa.org/</a> .                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| Electrical Safety Authority (ESA) approvals for any electrical equipment                             | Visit <a href="https://esasafe.com/">https://esasafe.com/</a> for more information.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |
| Letter from owner                                                                                    | If the filming is on private property, a letter from the owner giving permission to film.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
| York Region's event form(s) (if you intend to have food vendors, personal services, or petting zoos) | The Regional Municipality of York (York Region) requires event organizers who would like to have certain types of events to complete York Region's forms and submit them to the Region at least 30 days in advance of the event. The City also requires you to submit either the form(s) or approval emails from York Region with this application. Visit <a href="https://www.york.ca/health/food-">https://www.york.ca/health/food-</a>                                                                                                                                                                                                                                                                                                                                                                                    |



| •                                                                                                                                                                                      |                                                                                                                               |                                                                                      |                                      |                              |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------|--------------------------------------|------------------------------|
|                                                                                                                                                                                        |                                                                                                                               | safety/s                                                                             | special-events-farmers-markets-a     | nd-wild-game-dinners for     |
|                                                                                                                                                                                        |                                                                                                                               | the form, on the York site <a href="https://www.york.ca/">https://www.york.ca/</a> . |                                      |                              |
|                                                                                                                                                                                        | Authorized Agent                                                                                                              | If the applicant would like to appoint an Authorized Agent, Section                  |                                      |                              |
|                                                                                                                                                                                        | Identification                                                                                                                | 3 must                                                                               | be completed and one piece of C      | anadian government-          |
|                                                                                                                                                                                        | (if applicable)                                                                                                               | issued                                                                               | photo identification for the Autho   | rized Agent must be          |
|                                                                                                                                                                                        |                                                                                                                               | submitt                                                                              | ed which demonstrates the agen       | t is at least 18 years old.  |
| Sect                                                                                                                                                                                   | ion 8 – Declarations                                                                                                          |                                                                                      |                                      |                              |
| By si                                                                                                                                                                                  | gning below, the app                                                                                                          | licant (or                                                                           | the applicant through the author     | rized agent) certifies that: |
| 1)                                                                                                                                                                                     | The information co                                                                                                            | ontained                                                                             | in this application, attached plans  | s and specifications, and    |
|                                                                                                                                                                                        | other attached do                                                                                                             | cumenta                                                                              | tion is true and accurate to the be  | est of the applicant's       |
|                                                                                                                                                                                        | knowledge.                                                                                                                    |                                                                                      |                                      |                              |
| 2)                                                                                                                                                                                     | The person submit                                                                                                             | ting this                                                                            | application has the authority to b   | oind the applicant.          |
| 3)                                                                                                                                                                                     |                                                                                                                               | _                                                                                    | s that the application may contai    | -                            |
|                                                                                                                                                                                        |                                                                                                                               |                                                                                      | cipal Freedom of Information and     | ·                            |
|                                                                                                                                                                                        |                                                                                                                               | •                                                                                    | d pursuant to the provisions of the  | •                            |
|                                                                                                                                                                                        | •                                                                                                                             | _                                                                                    | n to process this application, for a |                              |
|                                                                                                                                                                                        |                                                                                                                               | -                                                                                    | oliance with all applicable statutes |                              |
|                                                                                                                                                                                        | Questions about this collection should be directed to the Chief Licensing Officer, By-                                        |                                                                                      |                                      |                              |
|                                                                                                                                                                                        | law and Compliance, Licensing and Permit Services, City of Vaughan, 2141 Major                                                |                                                                                      |                                      |                              |
|                                                                                                                                                                                        | Mackenzie Drive West, Vaughan, Ontario L6A 1T1, telephone number (905) 832-2281.                                              |                                                                                      |                                      |                              |
| 4)                                                                                                                                                                                     | ,                                                                                                                             |                                                                                      |                                      |                              |
| _,                                                                                                                                                                                     | suspend, revoke or place of conditions on any licence.                                                                        |                                                                                      |                                      |                              |
| 5)                                                                                                                                                                                     |                                                                                                                               |                                                                                      |                                      |                              |
|                                                                                                                                                                                        | responsibility to be compliant with all applicable by-laws and regulations, such as                                           |                                                                                      |                                      |                              |
|                                                                                                                                                                                        | from the City of Vaughan, the Regional Municipality of York, and the Alcohol and                                              |                                                                                      |                                      | and the Alcohol and          |
| <b>C</b> :                                                                                                                                                                             | Gaming Commission of Ontario.  Signature of at least one of the applicant(s), such as the sole proprietor, partners, officers |                                                                                      |                                      |                              |
| _                                                                                                                                                                                      |                                                                                                                               | of the ap                                                                            | plicant(s), such as the sole propr   | letor, partners, officers    |
| or directors  Note that only those applicants whose names and signatures are submitted below, will be                                                                                  |                                                                                                                               |                                                                                      |                                      |                              |
|                                                                                                                                                                                        | • • •                                                                                                                         |                                                                                      | _                                    |                              |
| authorized to manage the licence. If there are more than two applicants to be listed, you can include their names, signatures and the date of signatures on the back of this document. |                                                                                                                               |                                                                                      |                                      |                              |
|                                                                                                                                                                                        |                                                                                                                               | itures an                                                                            |                                      |                              |
| Nam                                                                                                                                                                                    | e of applicant 1                                                                                                              |                                                                                      | Signature of applicant 1             | Date (dd/mm/yy)              |
|                                                                                                                                                                                        |                                                                                                                               |                                                                                      |                                      |                              |
| N.1                                                                                                                                                                                    | · · · · · ·                                                                                                                   |                                                                                      |                                      | D : (11/ / )                 |
| Nam                                                                                                                                                                                    | e of applicant 2                                                                                                              |                                                                                      | Signature of applicant 2             | Date (dd/mm/yy)              |
|                                                                                                                                                                                        |                                                                                                                               |                                                                                      |                                      |                              |
| Sign                                                                                                                                                                                   | ature of the authorize                                                                                                        | ed agent                                                                             | (if applicable)                      |                              |
|                                                                                                                                                                                        | e of authorized agent                                                                                                         |                                                                                      | Signature of authorized agent        | Date (dd/mm/yy)              |
|                                                                                                                                                                                        |                                                                                                                               |                                                                                      |                                      |                              |



| For office use only             |                           |
|---------------------------------|---------------------------|
| Reviewed by the following staff | Date of review (dd/mm/yy) |
|                                 |                           |
|                                 |                           |
|                                 |                           |