Grand Canyon Resort Corporation

Mobile # Fax #

Email address

Application for Photography/Filming Permit



Applicant	
First & Last Name	
Social Security/TIN#	
Address	
City/State/Province	
Postal Code	
Country	
Telephone #	
Mobile #	
Fax #	
Email address	
Company	
Company	
Tax ID #	
Address	
City/State/Province	
Postal Code	
Country	
Telephone #	

Project Name		
Location Mana	ger	
Telephone #		
Mobile #		
Email address		
Producer		
Photographer Director		
	non.	
Insurance Com	ірапу	
Type of Project	ct	
□ Stills, editoria	al	□ Documentary/Travelogue
□ Stills, adverti	sing	□ Commercial
□ Stills, other		□ Music Video
□ Stock photo/	video/film	□ Infomercial
□ Feature film/	TV movie	□ Public Service Announcement
□ TV series/Pil	ot	
□ Other (please	e explain)	
	ound recording?	
□ Yes	□ No	
Night work?		
-	□ No	

Please provide detailed description of on-site activities

Talent comprises anyone in front of the camera and includes, but is not limited to, actors, hosts, correspondents, presenters, site visitors, cooperators, volunteers, GCRC staff, etc.				
Do you intend to utilize talent?				
•				
□ Yes □ No				
If yes, please provide full description of who they are and how they will be utilized				

Location Schedule

Date	Location	Start Time	End Time	Interior or Exterior	Film Strike Prep	# of cast
		Time	Time	Exterior		and crew on-site

How will individuals with access to the site be identified? (Credentials are recommended)

Please explain e	lectrical needs, if	any 				
•	e: Location area c No	loes not have p	ermanent p	oower)		
If yes, size of ge	nerator					
Lighting?	Reflectors only	□ Yes				
If yes, please ex	plain					
Road closure red	quested? No					
Running shots □ Driving shots			□ Wet	down		
□ Drive-bys				□ Road camera/Equipment on road shoulder		
□ Tow shots	Е			era/Equipme	nt on median	
□ Drive-ups & Av	way					
□ Other (please	explain)					
Vehicles Personal Cars Large Trucks Other Trucks Vans Motor Homes Other Vehicles (- -		Camer Picture	Fractor Trailer ra Car e Cars ng Rooms		
Please list vehicl necessary).	es to be parked o	n or need acces	ss to park p	property (<i>attac</i>	ch additional sheets if	
Make	Model	Co	olor	State	License Plate #	

Base Camp location (attach diagram, if nece	essary)			
Catering Information Catering Company				
On-site Manager				
Food License Information				
Equipment				
Special Activities				
Children? □ None □ Yes # of children	Age range			
Animals? □ None □ Yes (please explain)				
Trainer name	Phone #			
Aircraft □ No □ Yes (please explain)	□ Yes (please explain)			
Special Effects				
Please explain any special effects				
Effects Technician				
Phone #				
License # (if applicable)				
Permit # (if applicable)				
Stunts (please explain)				
Stunts coordinator Phone #				
-				
Any other unusual or hazardous activities?				

Are you famili recommended □ Yes	ar with or have visited the requested a d. □ No	ırea?	Site visit prior to project strongly
□ 1 63			
•	ained a permit from Grand Canyon Re permit dates and locations on separate No		Corporation in the past? (<i>if yes, please</i> ge)
Do you plan to □ Yes	o advertise or issue a press release be	efore	event?
Please attach This may inclu	any additional pages of information no	eede	d to evaluate your permit request.
 Set constr 	ruction	•	Off-Road Activity
 Parking 		•	Trail Use
 Sanitary F 		•	Building Use
• Crowd Co		•	Site Clean Up
• Emergence	y Medical Plan	•	Proposed Site Plan
Contacts			
Person on loc	ation responsible for adherence to all	terms	s & conditions of permit
Name			
Title			
Phone			
Mobile			
Person on loc	ation responsible for coordinating activation	vities	with GCRC
Name			
Title			
Phone			
Mobile			
Person at con	npany office to contact for follow-up in	forma	ation and billing
Name			

Title

Phone

I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Signature
Title
Date
Company Name

Fill out attached Credit Card Authorization Form and submit for the amount of \$150.00 (Application Fee).



Credit Card Authorization

l,	authorize Hualapai Tourism Res	ervation Center
to charge my	credit card on	in
the amount of \$_150.00	0 Order # (To b	e completed by GCRC)
Please fill out the follo	owing information and return fax or e	mail with a copy
of your driver's license	e and credit card to.	
Name on Reservation	1	
CC#		
Name as it appears o	n credit card	
CSV code (3 di	git code on the back of your card)	
Expiration date		
Billing address		
Signature		

Hualapai Tourism Reservation Center <u>www.hualapaitourism.com</u> 888-868-9378 or 928-769-2236



Airport Contact: Brad Falcetti 928-769-2627 ext. (251)

GCW Contact: Ray Martinez 928-769-2627 ext. (214)

Grand Canyon West Airport (1G4)

Drone Waiver Authorization

THIS FORM MUST BE COMPLETED BEFORE AUTHORIZATION WILL BE CONSIDERED

- What is the name of the person responsible for all activities? (Add contact information for response to this form) Number of drones and names of all operators (No more than one drone per operator) Method of contacting each drone pilot? (Cell phone number or radio frequency) Do all operators have a Remote Pilot Airman Certificate? (If yes, please attach) Are all Drones/UAS certified? (If yes, please attach) Where you will be operating? (Please name all GCW attractions you will be flying at; if not at an attraction, longitude & latitude) The altitudes at which you will be flying? (Must fly under 400 feet above ground level) What type of flight will be conducted? (Recreational or Professional; if professional, commercial use or incidental to business) What date will be flying, start time, and duration of flight? (Total time if multiple flights operations will be occurring) 10. A method to determine when activity begins and ends?
- 12. Additional information you feel will be relevant to the flight?

11. Will you adhere to all Federal Aviation Administration (FAA) regulations on the following page?

FAA Drone Flight Requirements:

Pilot RequirementsMust have Remote Pilot Airman Certificate

Must be 16 years old Must pass TSA vetting

Aircraft Requirements Must be less than 55 lbs.

Must be registered online if over 0.55 lbs. (online)

Must undergo pre-flight check to ensure UAS is in condition for safe operation

Location Requirements Class G airspace (Grand Canyon West Airport is Class G airspace)

Operating Rules Must keep the aircraft in sight (visual line-of-sight)

Must fly under 400 feet

Must fly during the day (Civil Twilight to Civil Twilight)

Must fly at or below 100 mph

Must yield right of way to manned aircraft

Must NOT fly over people

Must NOT fly from a moving vehicle

Example Applications Flying for commercial use (e.g. providing aerial surveying or photography services)

Flying incidental to a business (e.g. doing roof inspections or real estate photography)

Legal or Regulatory Basis Title 14 of the Code of Federal Regulation (14 CFR) Part 107