



## Buffalo Bayou Partnership

buffalobayou.org  
 Park Office Location & Mailing Address:  
 105 Sabine Street  
 Houston, TX 77007  
 713.752.0314 ext. 301

### **BUFFALO BAYOU PARK CISTERN Photography & Film Application**

#### I. FEES

#### Personal – Use Photography Access

Fee
\$300/hour

*\*Photography access at this rate is available for personal-use photography only.*

#### Photography, Film, and Events

Fee	Length
\$1,500*	Half Day (up to 6 hours)
\$3,000	Full Day (up to 12 hours)

*\*Deposit will be determined by potential impact.*

#### II. SHOOT DETAILS

Project Name:				
Shoot Date(s):	START DATE:	START TIME:	END DATE:	END TIME:
Project Type:	Still Photography (Commercial Use) Film (Student/Documentary/B-roll) Film (TV/Web) Film (Music Video) Film (Movie/Motion Picture)			

Please submit to: [permits@buffalobayou.org](mailto:permits@buffalobayou.org)

Feature Length (film only):	
Applicant Name:	
Company / Agency / Sponsor:	
Organization Type: For Profit/Commercial	Non-Profit: Tax
ID# _____	

Address:	
City/State/Zip:	
Phone:	
Cell / Other:	
Email:	

Social Media:	Facebook		Followers	
	Instagram		Followers	
	Twitter		Followers	
	Other		Followers	

Onsite Contact:	Name: _____
	Cell: _____

<b>Shoot Description:</b>	<i>Please detail the content of your shoot as well as the use/distribution of the final product.</i>
<b>Set Up Details:</b>	<i>List all equipment used inside.</i>

### III. INSURANCE AND INDEMNITY

<b>Event Insurance:</b>	<p>Applicant shall, at its sole cost and expense, obtain and maintain the following policies of insurance in form and substance, and with insurers, satisfactory to BBP, and provide a full and complete copy of each policy to BBP at least fourteen (14) days prior to the Event:</p> <p><i>Commercial General Liability Policy:</i> A commercial general liability insurance policy written on an occurrence basis, naming Applicant as the named insured (with the effect that Applicant and its employees and contractors of any tier are covered) and Buffalo Bayou Partnership and the City of Houston as additional insured and additional certificate holder, affording protection against liability arising out of personal injury, bodily injury, sickness and death or property damage occurring, in, upon or about the event. General Liability Insurance Policy shall have the following policy limits: (i) \$1,000,000 each occurrence and (ii) \$2,000,000 general aggregate. General Liability Insurance Policy will be effected under valid policies by insurers having an Alfred M. Best Company, Inc. rating of "A-" or better and a financial size category of not less than "VIII" and shall include a waiver of all rights of subrogation against BBP and the City.</p>	
<b>Indemnification:</b>	<p>The applicant/authorized agent and any other persons on whose behalf the application is made must covenant and agree in writing that they will, jointly and severally, indemnify and hold the city harmless against liability for any and all claims, judgments and associated legal expenses and costs and for claims and litigation arising out of the special event including, but not limited to, those for damage to property or injury to or death of persons.</p>	
<b>Insured Information:</b>	<p>Buffalo Bayou Partnership 1019 Commerce Street, Suite 200 Houston, TX 77002</p>	<p>City of Houston 901 Bagby Street Houston, TX 77002</p>

Please submit to: [permits@buffalobayou.org](mailto:permits@buffalobayou.org)

**IV. CISTERN RULES AND REGULATIONS**

- NO CHILDREN UNDER THE AGE OF 9
- Animals are not permitted
- No eating, drinking, or gum-chewing in the Cistern
- No smoking allowed
- Strollers, roller skates, inline skates, and bicycles are not permitted.
- Littering is prohibited. Use trash receptacles upon entry.
- No sitting, standing, or climbing on the railing, stairways, or ladders
- No running
- All visitors must comply with instructions or requests from the Buffalo Bayou Park Cistern attendants and staff and must be respectful of others
- Destroying public property is prohibited by Title 19, Chapter 191 of the Government Code of Texas

*I hereby certify that the above information is complete and correct and agree to all requirements set forth.*

Applicant Signature: \_\_\_\_\_

Date: \_\_\_\_\_