



# FILMING PERMIT APPLICATION FORM (Low Impact)

## OVERVIEW

This permit application applies to filming on Council owned and managed land only, including land, roads, footpaths and car parks.

## APPLICATION FEE

**Application fee:** \$155 (non refundable)

**Permit fee:** \$155  
(Students and non-for-profit organisation) do not need to pay.

## LODGEMENT



### EMAIL:

[caseycc@casey.vic.gov.au](mailto:caseycc@casey.vic.gov.au)



### IN PERSON:

**Bunjil Place Customer Service**  
2 Patrick Northeast Drive, Narre Warren



### POST:

City of Casey  
PO Box 1000,  
Narre Warren, VIC 3805

**Cranbourne Customer Service**  
Shop 61, Cranbourne Park Shopping Centre

*Visit the City of Casey Website for opening hours*

## APPLICATION DECLARATION:

### By lodging this application, you declare that:

- You are the applicant or are authorized by the applicant to lodge this application.
- The information provided in this application form and any attachments is true and correct. You understand that it is an offence to provide false information and penalties apply.
- If required, you have obtained all other necessary permits, licenses, registrations, and approvals from other Victorian government agencies to comply with the law.
- If the permit is granted, you will comply with all permit conditions and the *Casey Community Local Law 2025*.

### Contact the City of Casey:

**Web:** [casey.vic.gov.au](http://casey.vic.gov.au)  
**Email:** [caseycc@casey.vic.gov.au](mailto:caseycc@casey.vic.gov.au)  
**Phone:** 03 9705 5200  
**Post:** PO Box 1000, Narre Warren VIC 3805  
**NRS:** 133 677 (for the deaf, hearing or speech impaired)

### Customer Service Centres:

**Narre Warren:** Bunjil Place, Patrick Northeast Drive  
**Cranbourne:** Cranbourne Park Shopping Centre  
**ABN:** 43 320 295 742



**APPLICATION REQUIREMENTS:**

To be eligible for a permit, you must provide certain information specified in this checklist. Not providing the information will result in a delay or non-approval of your permit application.

- Applications must be submitted at least 28 days before the requested permit date.**
- If you are student, a copy of your educational institution’s public liability insurance with a minimum coverage of \$20M.**
- For all other applicants other than students, a copy of your Public Liability Insurance policy.**  
All applicants must hold the appropriate public liability insurance with a minimum coverage of \$20M.

**Obligation to Insure**

*The Permit Holder shall at all times during the agreed Term, be the holder of a current Public Liability Policy of Insurance (“The Public Liability Policy”) in respect of the activities specified herein in the name of the Permit Holder providing coverage for a minimum sum of \$20M (or more). The Public Liability Policy shall cover such risks and be subject only to such conditions and exclusions as are approved by the Council and shall extend to cover the Council in respect to claims for personal injury or property damage arising out of the negligence of the Permit holder.*

**Councils indemnity**

*The Permit Holder agrees to indemnify and to keep indemnified, the Council, its servants and agents, and each of them from and against all actions, costs, claims, charges, expenses, penalties, demands and damages whatsoever which may be brought or made or claimed against them, or any of them, in connection with the Permit Holders performance or purported performance of its obligations under this Permit and be directly related to the negligent acts, errors or omission of the Permit Holder. The Permit Holders liability to indemnify the Council shall be reduced proportionally to the extent that any act or omission of the Council, its servants or agents, contributed to the loss or liability.*

- Risk management plan.** If you have prepared a risk assessment and management plan, attach a copy with your application.
- Traffic and pedestrian management plan.** If filming on a road, arterial road or freeway you must complete a City of Casey Traffic Management Plan Submission Form found on Councils webpage <http://www.casey.vic.gov.au/roads-drains/roads/traffic-management-plan>. You must also attach a copy of a Traffic Management Plan prepared by an approved or ticketed Traffic Management Contractor. All applicants will also need to complete the questions in the traffic and pedestrian management section of this form.
- Copies of written approval from other agencies (if relevant)**
- Completed payment for all applicants other than students.**
- Working with Children Checks.** Valid Working with Children Check must be held by the production crew if children up to the age of 18 are involved in filming. More information is available at <https://www.workingwithchildren.vic.gov.au/>
- Student Applicant must provide a copy of student card.**
- Non-for-Profit Organisations must provide relevant documentation as evidence of nonprofit status.**

The City of Casey is committed to creating and maintaining a child safe organisation where protecting children and preventing and responding to child abuse is embedded in the everyday thinking and practice of all Councillors, employees, contractors and volunteers. Please attach a copy of your Child Safe Policy and/or Statement if children up to the age of 18 are involved in filming.

**PRIVACY STATEMENT:**

I have read and agree to City of Casey’s Privacy Policy accessible at <https://www.casey.vic.gov.au/privacy>. We will only use the personal information provided by you for the purposes for which it was collected and any other authorised use. The information we collect may also be used for our planning and research purposes to improve the services to the community. We will never reveal personal information we collect to third parties unless disclosure is required or authorised by law. If you have any queries or need further information on privacy-related matters, please contact Council’s Privacy Officer.”

I consent that the City of Casey (“Council”) will collect my personal information, where Council believes it is reasonable, limited to, third parties and other agencies. I understand and accept that Council is not liable for third-party disclosure, distribution, copying, or misuse of the information contained in this form.

**APPLICANT'S DETAILS:**

**Name of Applicant**

Surname:

First Name:

**Company Name/ School/Tafe/Uni Details:**

Address 1:

Address 2:

Suburb:

Postcode:

Phone:

Email:

**PRODUCTION/FILMING DETAILS:**

**Nature of Filming**

Commercial

Not-for-profit

Student

**ONSITE CONTACT**

Surname:

First Name:

Phone:

Email:

**Provide a brief description or synopsis of the plot/action**

**Expected number of Crew:**

**Expected number of Cast:**

**Are children under 18 part of the Cast?**

Yes

No

**What type of equipment will be used to film? (Choose all that apply)**

TV Camera

Film Camera

Vehicle Mounted Camera

Hand-held/steady camera

Drone/s

Other (specify):

**Provide details of the filming locations and times. You must provide enough information for Council to identify the exact location including a Melways reference. If filming at more than one location, attach a separate list including all the details below.**

Location name (if applicable):

Street address:

Suburb:

Postcode:

Type of location:

Park or reserve:

Road:

Car Park:

Other (specify):

Filming times (including set-up and pack-up) and locations:

Start date:

Start time:

Finish date:

Finish time:

Are you planning on erecting any temporary structures at this location?

Yes

No

If yes, provide details

Will your filming/shoot impact local residents/business (including traffic impacts)? If yes, provide details

**RISK MANAGEMENT**

**Level of risk**

L = Low	Low risks and low consequences that may be managed by routine procedures
M = Medium	Medium risks that are likely to arise or have serious consequences requiring attention
H = High	High risks that are likely to arise and have potentially serious consequences requiring attention and investigation
E = Extreme	Extreme risks that are likely to arise and have potentially serious consequences requiring immediate action

**Risk assessment and management plan**

Specific activity	Level of risk	Control measure	Responsible person

**CREDIT CARD AUTHORISATION  
CARDHOLDER’S DECLARATION**

I declare that I am the authorised cardholder of this credit card and understand it is an offence to provide false information and penalties apply.

CREDIT CARD DETAILS:	
<b>Type of credit card</b>	
<input type="checkbox"/> Mastercard	<input type="checkbox"/> Visa
Name of Cardholder:	
Contact Phone (business hours):	
Card Number:	
Expiry Date:	CCV:
Amount (\$):	