



Film Permit Application

For Outdoor Commercial-Use

Please sign and date all declarations by hand or electronically. If submitting by mail, please send the application and all required attachments to:

Office of Cultural Affairs

200 East Santa Clara St. 12th Floor, San Jose, CA 95113
Tel: (408) 793-4344 Fax: (408) 971-2597 **Submit by email to:**
OCAApplications@sanjoseca.gov

Or if in a park, please send to:

Special Park Use Unit Leininger Center 1300 Senter Road
San Jose, CA 95112
Tel: (408) 793-6500 Fax: (408) 286-3682 **Submit by email to:**
SPUApplications@sanjoseca.gov

For City Hall Filming Inquiries, please call (408) 535-1248 or
email.Event.Services@sanjoseca.gov

Mandatory Attachments Checklist (required to be submitted with every application):

Film Project Scene Summary

Please include or attach a short summary of your film project's scene.

Route Map

A map of the route, start and finish points, direction of movement and street closures including the specific lane(s) requiring closure.

Certificate of Insurance

A certificate of insurance for any event on public land is required and must be submitted a minimum of 14 days prior to the event start day. Submission guidelines may be found on page 3 of this application.

Private Property Letter

For private property filming events, a letter from the property owner or agent authorized by the owner must be included with this application. The letter should be on company letterhead acknowledging their approval of the filming event, knowledge of the date, time, and activities scheduled to take place. Contact information (address, email, and phone) for this individual should be included in the letter.



City of San José Film Permit Application

Thank you for selecting San José as the site for your filming purposes. The information requested in this application will be used to determine your eligibility for a permit to conduct the proposed event. When you submit this application, it is considered a request for permit only; submission does not mean that the event has been approved. In order for a film permit to be approved, all required permits must be obtained and fees paid. Any misrepresentation in this application or deviation from the final permit conditions may result in immediate revocation of the event permit and the canceling of the event.

I. PLEASE PROVIDE US WITH THE FOLLOWING DETAILS ABOUT YOUR PROJECT:

Project Title: _____
 Production Company Name: _____
 Production Company Address: _____
 City: _____ State: _____ Zip Code: _____
 Contact's Full Name: _____
 Contact Phone #: _____ Contact Alt. Phone #: _____
 Contact Email Address: _____

Permit Category Applying For (please check all that apply):

<input type="checkbox"/> Feature	<input type="checkbox"/> TV 1/2 Hour	<input type="checkbox"/> TV 1 Hour	<input type="checkbox"/> TV Pilot	<input type="checkbox"/> Other: _____
<input type="checkbox"/> TV Commercial	<input type="checkbox"/> Web Commercial	<input type="checkbox"/> B-Roll	<input type="checkbox"/> Stills	_____

II. PLEASE PROVIDE LOCATION/FILMING INFORMATION:

Film Project Date(s)/Time(s):

<u>Set-Up Date:</u>	<u>Start Time:</u>	<u>End Time:</u>
<u>Date #1:</u>	<u>Start Time:</u>	<u>End Time:</u>
<u>Date #2:</u>	<u>Start Time:</u>	<u>End Time:</u>
<u>Date #3:</u>	<u>Start Time:</u>	<u>End Time:</u>
<u>Clean-Up Date:</u>	<u>Start Time:</u>	<u>End Time:</u>

Check and complete ALL applicable location boxes:

- On the Downtown Parade Route (Santa Clara and Market St.)
- In a City Park/Trail.....Name of Park(s)/Trail(s): _____
- In a Paseo/Plaza.....Name of Paseo(s)/Plaza(s): _____
- In a City Street.....City Street Address: _____
- On Church or School Private Property...Property Address: _____
- On Private Property*.....Private Property Address: _____

***Please note: For private property requests within residential areas, OCA can only permit schools, churches, or lawful non-residential properties excluding vacant properties. A letter from the property owners or property owners' authorized agent must be included in the application. (Municipal Code 20.80.1440)**

Assessor's Parcel Number(s) of Private Filming Location/Property: _____

Start Location: _____

End Location: _____

IV. CERTIFICATE OF INSURANCE GUIDELINES - Fourteen (14) days prior to your film project date, a valid certificate of insurance showing the following items must be sent to San Jose’s Office of Risk Management Office and included in the Application Packet you submit to our office:

- The City of San Jose, its officers, employees, agents and contractors are named as additional insured.
- Commercial General Liability: minimum \$1,000,000 combined single limit per occurrence for bodily injury and property damage including products and completed operations.
- Automobile Liability: minimum \$1,000,000 combined single limit per accident for bodily injury and property damage for all owned, hired or non-owned vehicles.
- Workers’ Compensation and Employers’ Liability: limit of not less than \$100,000 per accident as required by the Labor Code of the State of California.
- Commercial General Liability Certificate must be accompanied by the following endorsements:
- Ten (10) day Notice of Cancellation or changes of coverage shall be given to the City of San Jose.
- The insurance is primary insurance as respects the City, its officials, employees, agents and contractors. Any other insurance the City may have shall be considered excess insurance only.
- Coverage shall state that the Sponsor’s insurance shall apply separately to each insured against whom claim is made or suit is brought, except with respect to the limits of the insurer's liability.

V. DECLARATION

As the authorized representative of the applicant, I hereby understand that:

1. The information contained in this application and attachment(s) is true, complete and correct to the best of my knowledge. Any misrepresentation in this application or deviation from the final permit conditions may result in immediate revocation of the film permit and the canceling of the film project at the requested location(s). If any changes need to be made to this application, please contact City of San Jose Office of Cultural Affairs immediately.
2. Applicant agrees to defend, indemnify and hold harmless City, its officers, agents and employees from and against any and all claims, demands, causes of action, or liabilities incurred by City, its officers, agents, or employees, arising from Applicant's acts or omissions under this Agreement or any act of omission of Applicant's permission or invitation of Applicant, except as may arise from the negligence or willful misconduct of City, its officers, agents, contractors, or employees. In any action or claim against City in which Applicant is defending City, City shall have the right to approve legal counsel providing City's defense and such approval shall not be unreasonably withheld.
3. Applicant has received and understands the information contained in the Special Events Guidelines and will adhere to required arrangements listed within these Guidelines.
4. Applicant will pay for actual costs of any City services provided for your event within 30 days from receipt of City invoice.
5. No copyrighted musical or visual arts composition shall be performed or played, whether amplified, televised, in the form of a mechanical recording or personal rendition, or otherwise in connection with any use of City property, unless the Applicant shall have first obtained all approvals and paid any license fee or other fee required by the copyright owner. Without limitation of any other provision, Applicant's indemnification of City as set forth in a permit or authorization to conduct an event, shall include indemnifying and saving City harmless from and against any and all liability or responsibility whatsoever for any infringement of an/or other violation of the right of any such copyright owner under any copyright law.
6. **Acknowledgement** - The City of San Jose is required to be included in production credits for filming or videotaping on city streets or private property.

Signature: _____	Date: _____
Print Name: _____	Title: _____
Business Name: _____	Tel: _____
Email: _____	



**INSTRUCTIONS FOR SECONDARY EMPLOYMENT APPROVAL APPLICATION
FOR PRIVATE BUSINESSES AND PUBLIC AGENCIES
AND FOR SPECIAL EVENTS**

In order for San Jose police officers or reserve officers to be eligible work for your business or public agency while off-duty in any uniformed or non-uniformed security, patrol, private investigation or surveillance, traffic control, bodyguard, or other law enforcement or security related service capacity, your business or public agency must become an approved Secondary Employer pursuant to San Jose Municipal Code Chapter 8.16. The purpose of the Secondary Employment Approval is to regulate businesses and public agencies that are eligible to contract with off-duty officers in order prevent officers from engaging in any off-duty work or occupation that may be detrimental to the officer's service to the City, that prevents or impedes the efficient performance of the officer's duties in his City employment, or that in any way is in conflict with the officer's employment by the City.

Completion of the following application, including execution of the Acknowledgment of Terms and Conditions of Secondary Employment Approval ("Acknowledgment"), and the approval of your application by the Chief of Police, does not constitute an agreement by the City of San Jose to supply your business or public agency with off-duty officers. Your business must contract with each officer individually. It is up to the individual officer to decide whether he/she wishes to work for your business or public agency. The Secondary Employment Approval application must be fully completed and an authorized individual representing your business must sign the Acknowledgement.

A copy of the Acknowledgement is included and must be signed as a requirement for your business to qualify for the Police Department's Secondary Employer Program. The agreement to indemnify the City contained in the Acknowledgement is a term and condition of the Secondary Employment Approval, SJMC Section 8.16.070(C). As a participant in the program, your organization will be included as an additional insured under a Law Enforcement Professional Liability Insurance Policy that covers the City, the off-duty police officers and you.



**INSTRUCTIONS FOR SECONDARY EMPLOYMENT APPROVAL APPLICATION
FOR PRIVATE EMPLOYERS AND PUBLIC AGENCIES
AND FOR SPECIAL EVENTS (CONTINUED)**

The standard hourly rate for all off-duty uniformed employment is \$70.00 per hour with a minimum of 3 hours or \$210.00 per assignment. The standard hourly rate for supervisors working in a supervisory capacity for these jobs will be \$80.00 per hour with a minimum of 3 hours or \$240.00 per assignment. In special circumstances where a Lieutenant position is required, the standard hourly rate will be \$92.00 per hour with a minimum of 3 hours or \$276.00 per assignment.

Secondary Employers will pay time and one-half on any assignment exceeding eight (8) hours. Officers will be paid double time on the following holidays only:

- New Year's Eve from 12pm – 12am
- Thanksgiving Day
- Christmas Day
- New Year's Day
- Christmas Eve 12pm-12am

Payment is due directly to the individual officer. Cancellations must be made 48 hours prior to the scheduled event or a 3 hr. minimum will apply to each affected officer.

You must do the following at the time of application:

1. Visit us on the web for updated fees:
http://www.sjpd.org/Records/Fees_Public_Safety_Permits.asp
2. Return the completed and signed Secondary Employer Approval Application and Acknowledgement by:
 - a) Email (seu_requests@sanjoseca.gov) and make credit card payment over the phone **or**
 - b) Make a check payable to the **City of San Jose** and mail application to:

San Jose Police Department
Secondary Employment Unit
201 West Mission Street
San Jose, CA 95110

Contact the **Secondary Employment Unit** at (408) 277-4980 if you have any questions. Please be aware that we cannot process your request until payment is received.

APPLICATION

	SAN JOSE POLICE DEPARTMENT SECONDARY EMPLOYMENT UNIT 201 W. Mission Street San Jose, CA 95110 (408) 277- 4980	OFFICE USE ONLY Date: _____ Annual <input type="checkbox"/> Event <input type="checkbox"/> Exempt <input type="checkbox"/> Log <input type="checkbox"/> Approved <input type="checkbox"/> Disapprove <input type="checkbox"/> Signature: _____
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Employer: School/Public Entity <input type="checkbox"/> One-Time Event <input type="checkbox"/> Annual Employer <input type="checkbox"/>		
Form of Payment (Select " Exempt " if Applicable): Exempt <input type="checkbox"/> Check/Money Order <input type="checkbox"/> Credit Card <input type="checkbox"/>		Amount Due (Enter " 0 " if Exempt):
Company Name:		Company Phone:
Company Business Address:		
Company Mailing Address:		
Company Contact:	Title/Position:	Company Contact Phone:
Contact Email Address:		

FILL OUT INFORMATION BELOW IF APPLYING AS AN ANNUAL EMPLOYER

Job Site Address:	
Coordinating Officer's Name:	Officer's Duties:

FILL OUT INFORMATION BELOW IF APPLYING FOR A ONE-TIME EVENT

Name of Event:	
Location and Address of Event:	

WILL ALCOHOL BE SERVED? YES NO

Schedule Information:

Event Date(s):	Event Start Time:	Event End Time:	Est. Daily Attendance:
	AM <input type="checkbox"/> PM <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>	
	AM <input type="checkbox"/> PM <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>	
	AM <input type="checkbox"/> PM <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>	

Request for Officer(s) Information:

Officer Duties: _____

Date:	Officer Start Time:	Officer End Time:	Total Hrs:	Number of Officers:
	AM <input type="checkbox"/> PM <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>		
	AM <input type="checkbox"/> PM <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>		
	AM <input type="checkbox"/> PM <input type="checkbox"/>	AM <input type="checkbox"/> PM <input type="checkbox"/>		

ACKNOWLEDGMENT OF TERMS AND CONDITIONS OF SECONDARY EMPLOYER APPROVAL BY CHIEF OF POLICE

Approval by the Chief of Police of Secondary Employment of off-duty San Jose Police Officers and Reserve Officers by the Secondary Employer for law enforcement or security related services is subject to the terms and conditions specified below pursuant to SJMC Section 8.16.070. The Secondary Employer hereby acknowledges the following terms and conditions:

1. The Secondary Employer shall maintain records of each officer's hours of work in a format approved by the Chief of Police and make those records available for review by representatives of the San Jose Police Department during business hours.
2. The Secondary Employer authorizes the Chief of Police and representatives of the San Jose Police Department to inspect the Secondary Employer's business premises during business hours, or when the officer is actually working at the work site, including but not limited to inspection of the premises of the business and the work site of the off-duty officer or reserve officer for the purpose of assuring that the premises and the business are in compliance with the terms and conditions of the Approval and with the requirements of applicable provisions of the San Jose Municipal Code and any other applicable local, state or federal law or regulations.
3. The Secondary Employer shall operate the Secondary Employer business in compliance with the requirements of applicable provisions of the San Jose Municipal Code and any other applicable local, State or Federal law or regulation."
4. The Secondary Employer shall comply with the requirements of San Jose Police Department policy governing secondary employment in the San Jose Police Department Duty Manual Policy C 1500, Standards of Conduct – Secondary Employment.
5. **Pursuant to the terms of the indemnification requirements set out in Subsection C of SJMC Section 8.16.070 Secondary Employer acknowledges and agrees that in consideration of the CITY'S consent to allow the Secondary Employer to contract with off-duty San Jose Peace Officers for private security services and, when required, in consideration of the Secondary Employer's payment of the Secondary Employer Approval Fee, the Secondary Employer shall indemnify and hold harmless the CITY, its officers and employees, from any and all damages, costs, attorney's fees, expenses, losses or liabilities, arising out of the private security services performed by off-duty San Jose Police Officers or San Jose Reserve Police Officers for the SECONDARY EMPLOYER.**

- a. This indemnity shall commence either on July 1, 1998 or, at the time and on the date the part-time employment of the off-duty San Jose Police Officers or the San Jose Reserve Police Officers by the Secondary Employer begins if employment commences after July 1, 1998, and shall extend for the actual times and dates of such employment. Contracts between the Secondary Employer and the off-duty San Jose Police Officers or the San Jose Reserve Officers, written or oral, of all durations are covered under this indemnity to the extent the private security services are provided by the off-duty San Jose Police Officers or San Jose Reserve Police Officers for the Secondary Employer.
- b. For purpose of this indemnity, the term "private security services" includes any of the following services provided in plainclothes or in San Jose Police Department uniform as part of an off-duty, part-time engagement with a private person or public agency: private security guard, patrolperson, private investigation or surveillance, traffic control, bodyguard or other security or law enforcement related services.

Company Name

Street City

State Zip Code
()

Telephone

Owner or Authorized Agent (print name)

Signature

Date



**SAN JOSE POLICE
DEPARTMENT**
PERMITS UNIT/SECONDARY
EMPLOYMENT UNIT



SPECIAL EVENTS INFO SHEET

Customer Information

Current Fee Schedule: http://www.sjpd.org/PDF_Forms/Permit_Fees.pdf

- Special events coordinated through the Office of Cultural Affairs (OCA) applicants must provide copies of their permits to their OCA Coordinator no later than five (5) days prior to their event. Street closures and parades needing officers must be approved by Secondary Employment Unit.

SAN JOSE POLICE PERMITS UNIT

201 West Mission Street
San Jose CA 95110
(408) 277-4452

SECONDARY EMPLOYMENT UNIT

201 West Mission Street
San Jose CA 95110
(408) 277-4980

- Applicants must file with the Police Permits Unit not less than fifteen (15) days before the scheduled event and/or use (San Jose Municipal Code (SJMC) Sections 13.16.030 Street Closures and 13.12.050 Parades). **Please call SJPD Secondary Employment Unit (408) 277-4980 if you have any questions or need to schedule an appointment to process your permit.**
- A detailed, accurate and complete diagram of the proposed use (i.e., street names, areas to be closed off, route of event, etc.,) will accompany the application when submitted.
- The appropriate cost recovery fee set forth in the schedule of fees established by resolution of Council (SJMC 13.16.075) will accompany the application when submitted.
- After the permits are filed, the Police Permits Unit has five (5) days in which to approve or deny the application.
- If an application is denied by the Police Permits Unit, the decision may be appealed to the City Council by filing a written notice of appeal with the City Clerk within five (5) days of the date of denial (SJMC 13.12.080 and 13.16.060).
- All Street Closure and Parade permits are contingent on having proper insurance, barricades, and police officers for traffic control as may be required (SJMC 13.16.070). Failure to abide by these requirements will result in immediate revocation of the permit.

FOR ADDITIONAL INFORMATION ON SPECIAL EVENT PERMITS CONTACT:

Office of Cultural Affairs (408) 793-4344 FAX (408) 971-2597



**SAN JOSE POLICE DEPARTMENT
PERMITS UNIT/SECONDARY
EMPLOYMENT UNIT**



STREET CLOSURE/PARADE APPLICATION

IMPORTANT! READ FIRST BEFORE YOU PROCEED. FAILURE TO SATISFY THIS REQUIREMENT WILL RESULT IN A DELAY OR A DENIAL OF YOUR PERMIT APPLICATION. FEES ARE NOT REFUNDABLE.

For this permit to be issued, the following requirement **MUST** be satisfied. **GENERAL LIABILITY INSURANCE** covering the event and including the City of San Jose, its employees, officers, agents and contractors as additional insured must be presented to and approved by Risk Management at 200 E. Santa Clara St, San Jose, CA 95113. 408-535-7061. **MINIMUM AMOUNT OF LIABILITY COVERAGE MUST BE: \$1,000,000.00 and if pyrotechnics are to be used the minimum is \$2,000,000.00.**

NAME OF EVENT: _____

APPLICANT'S NAME: _____

WK PH: _____ **ADDRESS:** _____

CITY: _____ **ST:** _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

NAME OF THE ORGANIZATION/ BUSINESS: _____

NAME OF CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ **ST:** _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

STREET CLOSURE:

DATE: _____ **LOCATION:** _____

TIME _____ **TO:** _____

DATE: _____ **LOCATION:** _____

TIME: _____ **TO:** _____

PARADE:

DATE: _____ **LOCATION:** _____

TIME: _____ **TO:** _____

Permit must be in possession during the event and available for inspection by city officials and may be revoked for cause by the on scene supervisor.

SIGNATURE OF APPLICANT _____ **DATE:** _____

DO NOT COMPLETE THE SECTION BELOW - FOR SJPD VERIFICATION USE ONLY

ACC'T NO. _____ **ST CLOS \$** _____ **INSURANCE ON FILE WITH RISK MGMT/SEU?** YES NO

SEU REQUIRED? YES NO **IF SO, HOW MANY OFFICERS?** _____

PARADE: \$ _____

TOTAL: \$ _____

Who will be coordinating the officers? _____

POLICE APPROVED: YES NO

SIGNATURE: _____ **DATE:** _____

SJPD SECONDARY EMPLOYMENT UNIT 408-277-4980 FAX 408-297-5981

DEPARTMENT OF TRANSPORTATION

Section A: Tow Away Permit Applicant ("PERMITTEE")

Name: _____ Title: _____
 Organization/Company: _____
 Street Address: _____ City: _____ State: _____ Zip: _____
 Daytime Phone: _____ Cell: _____ Pager: _____

*** (Note: The person posting the signs must include his/her name and contact information on the posting log)**

Section B: Work Activity Information

1. Describe the specific work activity(s) to be performed within the street right-of-way:

- Construction/Maintenance Event(s) Other

Project Details: _____

2. City-issued temporary tow-away signs will be posted at the following location(s):

Street 1: _____ between _____ and _____

Street 2: _____ between _____ and _____

If work will be performed at multiple locations, check the box & attach a list of street locations.

Meter Pole Number example: "ABC123" (this number is on the meter pole / head facing the street)

Total Number of Parking Metered Spaces (if any): _____ Meter Pole Number: _____

Meter Pole Number (cont.): _____

3. The effective days, dates, and times to be shown on the face of tow-away signs are:

Effective Days: Mon. Tues. Wed. Thurs. Fri. Sat. Sun.

Effective Date(s): From: _____ To: _____

Effective Hour(s): From: _____ To: _____

4. City Job No. and City Inspector Name/No. : _____

Section C: Tow Away Permit Fee (\$50 permit fee, \$.55/sign plus tax, \$8/day Smart Meter* lost revenue fee, \$4/day all other meters lost revenue fee if applicable). *A Smart Meter is a meter that accepts credit cards.

Total amount due: \$ _____ Total # of signs: _____

Section D: Permittee's Statement of Understanding

I have read, understand, and agree to follow the attached instruction sheet entitled "TOW AWAY PERMIT CONDITIONS AND POSTING INSTRUCTIONS". This Tow-Away permit is issued with the understanding that a fee covering lost revenue on metered spaces will be charged if meters are affected by the tow away zone. Additional fees for the removal and replacement of meter heads and poles may also be charged under separate cover if applicable. **A copy of this permit must be displayed on all work vehicles parked within the tow-away zone.**

Applicant's Signature: _____ Date: _____

Section E: Department of Transportation Authorization

The City's Department of Transportation hereby grants permission to the applicant to post temporary Tow-Away/No Stopping signs for the dates, times, and locations indicated above in accordance with the "TOW AWAY PERMIT CONDITIONS AND POSTING INSTRUCTIONS".

Staff Confirmation: No Conflict

By: On behalf of John Ristow, Acting Director
 Department of Transportation
 Date: _____
 Staff: _____
 Date: _____





FIRE SAFETY SPECIAL EVENTS PERMIT APPLICATION



Please select:

- | | |
|--|--|
| <input type="checkbox"/> Festivals/Carnivals | <input type="checkbox"/> Candle/Open Flames Assembly Area* |
| <input type="checkbox"/> Tents, Canopies & Temp. Membrane Structures | <input type="checkbox"/> Special Assembly |
| <input type="checkbox"/> Pyrotechnic/Special Effects* | <input type="checkbox"/> Parade Floats |
| <input type="checkbox"/> Fire Watch* | <input type="checkbox"/> Other |
| <input type="checkbox"/> Bon Fire/Open Burn | *Supplemental form must be attached. |

Please provide the following information

Address of Event		
Day of the Event Contact	Day of the Event Contact's Phone No.:	
Business/Contact Address & Phone No.		
Date of event	Time of event	Type of event
Number of people anticipated	Date tent being erected (if applicable)	Size of tent (if applicable)
Cooking (what method? Bbq, propane..)	Food Trucks / How many?	Source of power?
Ground cover?	Entertainment (what type?) ☎	Will there be liquor served? ☎ Yes <input type="checkbox"/> No <input type="checkbox"/>

☎ = Call Police Department for License/Permits (408) 277-4452
 Call Office of Cultural Affairs if outdoor event of 3 days or less (408) 793-4345

IMPORTANT, Please Submit

A site plan indicating the tent and/or canopy dimensions, and distances from other tents and/or canopies, buildings, vehicle parking areas, and roadways shall be provided.

A plot plan, indicating seating, table, storage arrangements, seat spacing, aisle locations and widths, exit width/locations and exit sign locations shall be provided on a floor plan.

Applicant Signature	Date
Receiving Signature	Date
Plans Reviewed by Inspector Name/Signature	Date

For Office Use Only: <input type="checkbox"/>	No Fee	Comment:
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PUBLIC WORKS ELECTRICAL LOAD WORK SHEET

Note: Submit One Work Sheet for EACH Location Requiring Electric Power

Event Name:

Event Date(s):

Event Location:

Indicate the person to contact regarding the information on this worksheet

Contact Person:

Phone: Cell: Email:

List the Following Information:

- A. Quantity of the same type of appliance
- B. Type of appliance (amplifier, coffee pot, microwave, blender, refrigerator, etc)
- C. Voltage, watts or amps, horse power. (this information can be found on the manufactures name plate mounted on the appliance)

Quantity	Appliances	Voltage	Watts	OR	Amps	Horse Power
<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>
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<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>	<input style="width: 100%; height: 25px;" type="text"/>

Notes:

- 1. Multi-booth vendors submit a separate worksheet for each booth requiring electrical power.
- 2. Plug in only the listed appliances - no extra appliances may be used at your location.
- 3. Personal extension cords may be used inside booths only.
- 4. If the plug will not fit in a standard house hold receptacle, please make special note and contact Public Works to make special arrangements.

A fully completed Load Sheet and Payment to Public Works MUST be received no later than 2 weeks before your event.

**City of San Jose
 Department of Public
 Works Electrical Shop
 Attention: Frank Crusco
 1661 Senter Road 2nd Floor
 San Jose, CA 95112**

**Tel: (408) 975-7277
 Fax: (408) 277-5541
 Email: Frank.crusco@sanjoseca.gov**

Equipment/Booth
 Location Number