Appendix I – Resolutions

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FILMING

(USE THIS RESOLUTION FORMAT WHEN CLOSURE OF THE STATE HIGHWAY WILL REQUIRE TRAFFIC REDIRECTION ONTO LOCAL STREETS OR ROADS)

WHEREAS_______________ (name of production company) has applied to the State of California to conduct__________ (filming activities) ________ on State property; and

WHEREAS ____________ (the filming activities) ____________ will require the temporary closure of State Highway Route ____________ on ________ (date) ______ between ______ (location) __________ and _________________ between the hours of ____________ and __________; and

WHEREAS said temporary closure will cause the re-routing of traffic onto and over the following ______ (city streets/county roads) ____________________:

_________________________ (describe routing) ______________________.

NOW THEREFORE be it resolved that the City/County of ____________________ approves and consents to the proposed ______________ (filming activity) ______ and recommends approval of and consents to the proposed re-routing of traffic onto and over the described city streets/county roads upon terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.
WHEREAS ______ (name of production company) ___________ has applied to the State of California to conduct ___________ (filming activities) __________ on State property; and

WHEREAS __________ (the filming activities) ________________ will require the temporary closure of State Highway Route _______________ on _____ (date)_____ between ______ (location)_______ and _______________ between the hours of _________ and ___________; and

WHEREAS there is no acceptable alternate route, with the result that traffic normally using State Highway Route __________ will be temporarily halted or restricted.

NOW THEREFORE be it resolved that the City/County of ________________ approves and consents to the proposed ___________ (filming activity) __________ and recommends approval of and consents to the proposed closure/restriction of State Highway Route __________ upon terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.
WHEREAS __________ (name of production company)___________ has applied to the State of California to conduct __________ (filming activities)___________ on State property; and

WHEREAS __________ (the filming activities)___________ will temporarily impede and restrict the free passage of traffic over State Highway Route _______ on _______ (date)____ between _________ (location)_________ and ________________ between the hours of __________ and ____________; and

NOW THEREFORE be it resolved that the City/County of _________________ approves and consents to the proposed ________________ (filming activity)___________ and recommends approval of and consents to the proposed restriction of State Highway Route _________________ upon terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.
(To be addressed to the California Film Office)

__________(name of production company)_______________ has applied to the State of California to conduct ______________ (filming activities described)_________ on State Highway Route ______________ on __________ (date)_________, between __________ (location)_________ and _________________ between the hours of ___________ and _______________. Said event will require the temporary closure of State Highway Route __________, as indicated, and the re-routing of traffic over _____________________ (described ___________________ city streets/county roads)_______________________________.

The next regularly scheduled meeting of the City Council/Board of Supervisors of ______________ will be on ___________ (date)_________. A formal Resolution by the Council/Board cannot be obtained before the proposed date of the ______________ (filming activity)_________________. In my capacity as ______________ (title)______________________________ for the City/County of ________________, I am authorized to advise you that the City/County of ________________________ approves and consents to the proposed event upon such terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation and further recommends approval of and consents to the re-routing of traffic onto and over the named city streets/county roads.

Dated: ________________ Signed: ________________________________

(Title)
FILMING

(USE THIS DOCUMENT FORMAT WHEN TIME FACTORS DO NOT ALLOW A RESOLUTION TO BE ADOPTED BEFORE THE DATE OF THE FILMING)

(To be addressed to the California Film Office)

________(name of production company)________ has applied to the State of California to conduct ________________________ on State Highway Route _____________ on ______ (date)_________. between ____________ (location)________ and ______________________ between the hours of ____________ and ____________.

The next regularly scheduled meeting of the City Council/Board of Supervisors of will be on _______ (date)_______. A formal Resolution by the Council/Board cannot be obtained before the proposed date of _________________. In my capacity as ______ (title)__________ for the City/County of ______________________, I am authorized to advise you that the City/County of ______________________ approves and consents to the proposed event upon such terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.

Dated: _______________ Signed: _______________________________

(Title)
SPECIAL EVENT

(USE THIS RESOLUTION FORMAT WHEN CLOSURE OF THE STATE HIGHWAY WILL REQUIRE TRAFFIC REDIRECTION ONTO LOCAL STREETS OR ROADS)

WHEREAS ____________________ (sponsor) ___________ has applied to the State of California to conduct ____________________ (special event described) ___________ on State property; and

WHEREAS ____________________ (the event) __________________ will require the temporary closure of State Highway Route ____________ on ________ (date) between ______ (location) ___________ and _______________ between the hours of ______ and ________; and

WHEREAS said temporary closure will cause the re-routing of traffic onto and over the following ________ (city streets/county roads) ____________________:

__________________________ (describe routing) ____________________.

NOW THEREFORE be it resolved that the City/County of ____________________ approves and consents to the proposed ____________________ (special event) ___________ and recommends approval of and consents to the proposed re-routing of traffic onto and over the described city streets/county roads upon terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.
SPECIAL EVENT

(USE THIS RESOLUTION FORMAT WHEN THE SPECIAL EVENT REQUIRES CLOSURE OF THE STATE HIGHWAY AND THERE IS NO ACCEPTABLE ALTERNATE ROUTE)

WHEREAS ______________ (sponsor) ___________ has applied to the State of California to conduct __________ (special event described) ___________ on State property; and

WHEREAS _________   ___(the event)_______________        _____ will require the temporary closure of State Highway Route _______________ on _____(date)____ between __________(location)_________ and _________________ between the hours of __________ and _________; and

WHEREAS there is no acceptable alternate route, with the result that traffic normally using State Highway Route __________ will be temporarily halted or restricted.

NOW THEREFORE be it resolved that the City/County of _______________ approves and consents to the proposed __________(special event)_________ and recommends approval of and consents to the proposed closure/restriction of State Highway Route __________ upon terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.
SPECIAL EVENT

(USE THIS RESOLUTION FORMAT WHEN A RESTRICTION ON THE STATE HIGHWAY OCCURS BUT NO CLOSURE OR DETOUR IS REQUIRED)

WHEREAS __________ (sponsor)___________________ has applied to the State of California to conduct __________ (special event described)____________________ on State property; and

WHEREAS __________ (the event)_______________ will temporarily impede and restrict the free passage of traffic over State Highway Route _______ on _______ (date)____ between __________ (location)_________ and _______________ between the hours of __________ and ____________; and

NOW THEREFORE be it resolved that the City/County of _______________ approves and consents to the proposed ______________ (special event)_______________ and recommends approval of and consents to the proposed restriction of State Highway Route ______________ upon terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.
SPECIAL EVENT

(USE THIS DOCUMENT FORMAT WHEN TIME FACTORS DO NOT PERMIT A RESOLUTION ADOPTION BEFORE THE DATE OF THE SPECIAL EVENT AND REQUIRES RE-ROUTING OVER CITY STREETS/COUNTY ROADS)

(To be addressed to the Department’s Permit Engineer)

__________(sponor)_______________________ has applied to the State of California to conduct ___________________________ on State Highway Route ____________ on __________(date)________, between __________(location)_________ and _____________. Said event will require the temporary closure of State Highway Route ______, as indicated, and the re-routing of traffic over _______________________(described city streets/county roads)__________________________________________________________.

The next regularly scheduled meeting of the City Council/Board of Supervisors of _______________________________ will be on _____________(date)_____. A formal Resolution by the Council/Board cannot be obtained before the proposed date of the _____________(special event)________________. In my capacity as ____________________________ for the City/County of _______________________________, I am authorized to advise you that the City/County of _______________________________ approves and consents to the proposed event upon such terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation and further recommends approval of and consents to the re-routing of traffic onto and over the named city streets/county roads.

Dated: ________________ Signed: _______________________________

(Title)
(To be addressed to the Department’s Permit Engineer)

________(sponsor)_________ has applied to the State of California to conduct ___________________________ on State Highway Route ____________ on _______(date)______, between __________(location)_________ and _________________ between the hours of ___________ and ______________. The next regularly scheduled meeting of the City Council/Board of Supervisors of will be on ________(date)______. A formal Resolution by the Council/Board cannot be obtained before the proposed date of __________(event activity)___________. In my capacity as __________(title)____________ for the City/County of _______________________, I am authorized to advise you that the City/County of ________________________ approves and consents to the proposed event upon such terms and conditions deemed appropriate and necessary by the State of California, Department of Transportation.

Dated: _____________  Signed: _______________________________

 (Title)