



CITY OF CAPE TOWN | ISIXEKO SASEKAPA | STAD KAAPSTAD

ECONOMIC & HUMAN DEVELOPMENT

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THIS CITY WORKS FOR YOU

AD HOC INDEMNITY FORM

PLEASE USE BLOCK CAPITALS ONLY
ASTERISK (*) INDICATES REQUIRED FIELDS

I, (full name)

in my capacity as

of (full name of institution)

being duly authorised hereto on behalf of the said institution with regard to (supply full description of proposed event):

Permission granted for film/photographic shooting during the periods to
within the City of Cape Town

With full knowledge of such declaration, declare as follows:

I hereby indemnify the City of Cape Town against and hold it harmless from all or any loss or damage, actions, proceedings or claims arising from the permission granted for the holding of the above-mentioned event and / or arising from the negligence or gross negligence or any other cause whatsoever in connection therewith.

Date

Signature

Witness 1

Witness 2

Please note that a R2,00 revenue stamp must be affixed to this form. The stamp must be cancelled by adding your initials and the date thereon.

This original form must be submitted to teh Cape Town Film Office.