



**Judicial Council of California
Facilities Services
455 Golden Gate Avenue, San Francisco, CA 94102-3688**

APPLICATION FOR REVOCABLE LICENSE FOR THE USE OF REAL PROPERTY
(Must be submitted at least 30 days in advance of desired date of event)

INSTRUCTIONS: Complete this form and submit via e-mail to your court contact at: MET-Accounting@kern.courts.ca.gov

1. Name of Applicant: _____ Phone number: _____
Email: _____ Fax number: _____
 2. Organization name: _____ Phone number: _____
Organization address: _____
Type of organization: Education Government Non-Profit Private Entity Other
 3. Name of requested court facility: _____
Court facility address: _____
 4. Describe the intended use of the facility: _____

- a. Will food and non-alcoholic beverages be provided at this event? No Yes
If yes, describe your plan for clean-up and removal of waste generated by the event. **Food and beverages are not allowed in courtrooms.**

- b. Describe and/or list any posters and signs, special lighting, and furniture or equipment that you will bring to the location: _____

- c. List any additional information pertaining to this event not addressed above: _____

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5. Date(s) / Time(s) (including set up and clean up) requested: *(If this is a recurring event, please attach a separate sheet with a schedule for the calendar year).* **NOTE: A minimum License Fee of \$200 per day, per facility (which may or may not include parking lots and structures) may be charged for requested use. In addition, the Court may impose fees related to security and janitorial services. For commercial uses, the license fee will be determined upon review of the application. Fees are due a minimum of five (5) days prior to the first date of use.**

Date: _____ from: _____ a.m. to _____ a.m.

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Date: _____ from: _____ a.m. to _____ a.m.

Date: _____ from: _____ a.m. to _____ a.m.

6. Number of conference rooms requested: _____ Number of courtrooms requested: _____

Will the number of rooms needed change for any day of this request? No Yes

(If yes, attach a separate sheet listing each date with the requested number of rooms.)

7. Describe other areas of the court building or grounds requested: _____

8. Expected number of participants: _____

9. Will this event involve filming? Yes No

a. Name of filming project: _____

- b. Type of production: Feature Commercial TV MOW* Reality TV Music Video Still
 Student Documentary Educational Public Awareness
 Training/Instruction Other

*(Movie of the Week/Made for TV Movie)

c. Number of shoot days: _____

d. Describe in detail the scenes to be filmed: _____

e. List all equipment to be brought to the court facility with description of electrical needs: _____

I agree to pay the costs associated with this event as will be determined by the court and the Judicial Council of California and to provide a certificate of insurance as evidence that all required insurance is in full force and effect, and will provide any additional information and complete any necessary forms related to the issuance of a Revocable License for the Use of Real Property.

Signature: _____

Date: _____

(Electronic typed name indicates signature)

Title: _____

[Click here to view interim policy for 3rd party use of court facilities.](#)

COURT USE ONLY

Court to email this application to the Facilities Services Event Licenses mailbox at: icceventlicenses@jud.ca.gov.

Modifications or Restrictions (explain): _____

Name of room(s)/courtroom(s) approved for event: _____

Is this a court-sponsored event? YES NO

Is this request for use of the facility during non-business hours? YES NO

Have security arrangements been confirmed? YES NO N/A Pending

Have janitorial arrangements been confirmed? YES NO N/A Pending

- Court will collect the fee from Licensee
- Licensee will mail the fee to the Judicial Council

Make check payable to:
STATE OF CALIFORNIA, JUDICIAL COUNCIL
 Mail to:
 Judicial Council of California
 Facilities Services
 Attn: Event Licenses
 455 Golden Gate Avenue, 8th Floor
 San Francisco, CA 94102-3688

APPROVED

By: _____
 Court Executive Officer or Designee
 (Electronic typed name indicates signature)

Date: _____

 (Printed name if not typed above)

JUDICIAL COUNCIL USE ONLY

Building Name: _____
 County of _____

Building ID: _____
 Oracle ID: _____

Modifications or Restrictions (explain): _____

\$200 License Fee applies for each day of use: YES NO
 # of Days Total License Fee \$

Fee for commercial use \$

APPROVED

 Facilities Operations Supervisor Date
 (Electronic typed name indicates signature)

 Manager, Real Estate Date
 (Electronic typed name indicates signature)