

Film Permit Application Signature Sheet



City of Sierra Madre
 Film Division
 232 W. Sierra Madre Blvd.
 Sierra Madre, California 91024
 (626) 355-5278
 www.cityofsierramadrecalifornia.gov

NOTICE TO THE PUBLIC

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
ANN-MARIE MARTINEZ DR. MARTINEZ & ASSOCIATES	49 S. BALDWIN SUITE K	[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I, _____, declare under penalty of perjury under the laws of the State of California and the Sierra Madre Municipal Code that the foregoing is true and correct. I personally circulated the attached signature sheet for signing. I personally witnessed each of the appended signatures being written on the petition. To my best information and belief, each signature is the genuine signature of the person whose name it purports to be. The appended signatures were obtained between the dates of _____ and _____ inclusive.

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Please text completed form to (626) 381-9468

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
JEFF PARSON	49 S. BALDWIN AVE	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
TT SPORTS CARDS	626-230-8532		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Eloy Espinoza	49 S. Baldwin Ave ^{Sierra Madre CA}	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Sky Embassy	888-759-0222		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Martin Mesa	255 Baldwin Ave.	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Rede Ore Financial	818.284.6480		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Tania G.	805 Baldwin Ave B	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
DAN SKUDANA	85 S. BALDWIN AVE SIERRA MADRE	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Chris Pruess	4 N. Baldwin Ave	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
K Petrol	(626) 355-3337		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Susana Rodriguez	26 Baldwin av.		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Capelli Court	(626) 399-7141		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Isabella Dahan	29 N. Babbly Dr	[Redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Pax Pharmacy II	626-355-3456		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Sandy Duvall	20 N Baldwin Ave	[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
SierraFitness	(626) 836-1236		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
	28 N Baldwin #3 Ave		<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #	626-677-0336	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I, Luis Cortijo, declare under penalty of perjury under the laws of the State of California and the Sierra Madre Municipal Code that the foregoing is true and correct. I personally circulated the attached signature sheet for signing. I personally witnessed each of the appended signatures being written on the petition. To my best information and belief, each signature is the genuine signature of the person whose name it purports to be. The appended signatures were obtained between the dates of _____ and _____ inclusive.

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Hayden Tupton	12 1/2 N Baldwin	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* SIGNATURE		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Aaron Daniels	26 N. Baldwin Ave Ap 1	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Lorie Westmoreland	9 Kersting Ct.		<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Leonora Moss	626-355-1180	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
* Please -NO CREW PARKING ON Kersting Ct.			<input type="checkbox"/> Yes <input type="checkbox"/> No

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Date: _____

Please text completed form to (626) 381-9468

Film Permit Application Signature Sheet



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* NAME (Please Print)	* ADDRESS	SIGNATURE	APPROVE
Melina Pulido	1 Kersting Ct.	[Redacted Signature]	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Starbucks	(626) 355 8222		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
<i>Diana Browning Wright</i>	<i>55 East Sierra Madre Blvd Unit A Sierra Madre 91024</i>	<i>[Redacted Signature]</i>	<input checked="" type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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NAME	ADDRESS	SIGNATURE	
Dennis Gallagher	74 E. Sierra Madre Blvd, APT 5 Sierra Madre, CA 91024	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Dave Andzina	74 E Sierra Madre	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
ANDREA RODRIGUEZ	66 E. SIERRA BLVD.	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Armine DASHKICIAN	63 E. SIERRA MADRE	[Redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Scott [Redacted]	63 E Sierra Madre	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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NAME	ADDRESS	SIGNATURE	
RODRIK O. KANAKPETIAN	#150 Sierra Madre Blvd.	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
David Pous-Ghassemi	#42 Sierra Madre Blvd.	[Redacted]	<input type="checkbox"/> Yes <input type="checkbox"/> No
Herni Carrera	406 SIERRA MADRE	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Sylvia Beeman DDS	70 E Sierra Madre Blvd Sierra Madre CA	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Sylvia Beeman			<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Lydia Bangtson	55 E Sierra Madre Unit E	[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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GALLMORE	55 E UNIT D	[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Jorge Coliveres	602 Sierra Madre	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
MICHAEL SHEEHY	56 1/2 E SIERRA MADRE	[REDACTED]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
MIKE	12 W Sierra		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
HAPPYS	909 329 5772	[REDACTED]	<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
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I also understand that a minimum of 75% of residents within 250 feet of the perimeter of the property on which filming is to take place must consent before the permit will be granted. I, the undersigned, consent to / oppose filming in my neighborhood for the above dates, times and location. As the tenant of the undersigned property, I confirm that I have the legal right from the property owner to allow filming at / on this property and am over the age of 18 years.

* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Lumen Optometric	14 W Sierra Madre	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Tyler			<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Lumen Optometric			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

I, _____, declare under penalty of perjury under the laws of the State of California and the Sierra Madre Municipal Code that the foregoing is true and correct. I personally circulated the attached signature sheet for signing. I personally witnessed each of the appended signatures being written on the petition. To my best information and belief, each signature is the genuine signature of the person whose name it purports to be. The appended signatures were obtained between the dates of _____ and _____ inclusive.

Signature: _____ Date: _____

Please text completed form to (626) 381-9468

Film Permit Application Signature Sheet



City of Sierra Madre
 Film Division
 232 W. Sierra Madre Blvd.
 Sierra Madre, California 91024
 (626) 355-5278
 www.cityofsierramadrecalifornia.gov

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME <i>Erin Ritter</i> Syndicate Coffee	* PHONE # 18 W Sierra Madre Blvd	[REDACTED]	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Katsa Hisanaga	24w Sierra Madre Blvd	[Redacted]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Tu?	626 325 3840		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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Signature: _____

Date: _____

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* NAME (Please Print)	* ADDRESS	* SIGNATURE	APPROVE
Bri Krantz	24 c Sierra Madre blvd	[Redacted Signature]	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
* BUSINESS NAME	* PHONE #		<input type="checkbox"/> Yes <input type="checkbox"/> No
Madre Vintage	626.224.3994		<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No

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