

MAYOR'S OFFICE FOR FILM AND TELEVISION DEVELOPMENT

Location Use Form

(Please Print)

Company: _____

Contact: _____

Address: _____

City: _____ State _____ Zip _____

Phone: _____ FAX: _____

Name / Nature of Project: _____

Producer: _____ Director _____

Prod. Mgr. _____ Loc. Mgr. _____

Dates of Filming: _____

Exact Dates and Times Location Would be Used: _____

Describe Scene to be filmed: _____

List Firearms, dangerous materials, animals or special effects required at location: _____

Public Liability Insurance Company, Policy # and Agent: _____

Amount & Deductible: _____ Expiration Date: _____

List Equipment to be Used at Location: _____ Number in Crew: _____

No. of Trucks: _____ Number of Cars: _____

Miscellaneous: _____

Srvy. sent: _____ Srvy. recd. _____