

FILM REQUEST FORM FOR THE CITY OF BURBANK

Attn: Norma Brolsma

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Request By: _____
 Company: _____
 City, State: _____
 Project Title: _____
 Location Manager: _____
 Director: _____
 Producer: _____

Phone: _____ Date: _____
 Billing: _____
 Address: _____
 Phone: _____
 Type: _____
 Cell Number: _____
 Email Address: _____
 1st A.D.: _____
 Production Manager: _____

DATE(S) (MAXIMUM 7 DAY PERIOD)	DAY(S) OF THE WEEK	ARRIVAL TIME/WRAP TIME

LOCATION(S) ADDRESS Loc. 1
 : _____
 Loc 2 _____
 Loc 3 _____
 Loc 4 _____

TYPE OF ACTIVITY: (list activity at each location indicate interior or exterior filming, description of scene not necessary unless there will be: fight scene; pry used; animals at location; stunts)

ACTIVITY INVOLVES: ALTERATION OF LANDCAPE AUTO STUNT DRIVING SHOTS PHYSICAL FIGHTING
 SPECIAL EFFECTS (SEE FIRE DEPT. PERMIT) WEAPONS ANIMALS • WILL ANY CITY FACILITY AND/OR BUILDING BE USED IN FILMING? _____ IF SO, CITY FACILITY ADDENDUM MUST BE ATTACHED. TENTS/CANOPIES

STREETS TO BE POSTED: _____

CITY PARKING LOTS USED: _____ **APPROVED BY TRAFFIC ENG.** _____

VEHICLE TOTALS: TRUCKS _____ DRESS RMS. _____ VANS _____ PICTURE CARS _____ CONDORS _____
 GENERATOR(S) _____

CAST/CREW TOTALS: _____

OFFICERS REPORT TO:	LOCATION	TIME

