

Film Location Request Form

1.	License Agreement Notice Details	
	Parent Company Name:	Incorporation #:
	Company Name:	
	Address:	
	City:	Postal/Zip Code:
	Province/State:	
2.	Contact Information	
	Project Title:	
	Primary Contact:	
	Telephone Number(s):	
	Email Address:	
	Secondary Contact:	
	Telephone Number(s):	
	Email Address:	
3.	Requested Site	
	Location:	
	Preparation/Shoot Dates & Times:	
	Setup Date:	Time:
	Film Shoot Date:	Time:
	Wrap Date:	Time:
4.	Film Shoot Details	
Number of cast and crew on site at any given time:		
	Number of vehicles/trailers on site at any given time:	
	Parking Duration:	
	Please indicate whether animals/insects will be used during t	
	Special Requirements:	
	Type and number of animals/insects:	



	Special Effects that will be used on site at any given time: Description of Special Effects: Duration:		
5.	Additional Requests or Requirements: Please describe the scene(s) that will be shot on site and/or provide a scene description when submitting the Schedule C, be as descriptive as possible:		
	The requestor acknowledges receipt of the Licensor's License Agreement and further acknowledges having an opportunity to review the same prior to the submission of this Request Form. The requestor further agrees to execute the Licensor's License agreement "As Is" and unmodified or amended except for the inclusion of agreement specific terms in Recitals A and B and in Sections 1, 2, 3 and 12.		
	Date:		
	Per:		
	Name:		
	Title:		
	Authorized Signing Officer		
A	ppendix		
	t of attached supporting documentation		
1.			
2.			
3.			
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