

LOCATION SERVICE REQUEST APPLICATION

For the Attention of the Sakai Film Office

■ Applicant Information

Name	
Address	
Organization	
Representative Position & Name:	

We wish to request the use of your location service.

The following application is made with consent to the separate compliance guidelines.

■ Request Point of Contact (includes Location Coordinator)

Name	
Address	
Contact Details	TEL: FAX: Cellphone:
E-mail	

■ Production Company (not required if details are the same as the applicant)

Name of Production	
Address	
Name	
Contact Details	TEL: FAX: Cellphone:
E-mail	

■ Production Information

Name of Production	
Production Outline Scene Outline	
Production Type	<input type="checkbox"/> Movie <input type="checkbox"/> Advert <input type="checkbox"/> Promotional Video <input type="checkbox"/> TV show () <input type="checkbox"/> Other (Provide details:)
Director Performers etc. Principle Staff	
Distributor Broadcaster	
Intended Broadcast Release	TBC or confirmed
Attached Materials	<input type="checkbox"/> Planning Document <input type="checkbox"/> Schedule <input type="checkbox"/> Script <input type="checkbox"/> Staff / Actor List <input type="checkbox"/> Storyboard / Image Board, etc. <input type="checkbox"/> Other (Provide details:)

■ Shoot Location Details

Shoot Location	
Location Scouting Schedule	[] days between dates [] and [] TBC or confirmed
Shoot Schedule	
Shoot Details	
Name of On-Site Point of Contact	
Number of Shoot Staff	Location Scouting : [] people
	Location: [] people (breakdown: staff [] people, actors [] people, other [] people)
Shoot Vehicles	<input type="checkbox"/> Location Buses [] <input type="checkbox"/> Passenger Vehicles [] <input type="checkbox"/> Microbuses [] <input type="checkbox"/> 1 BOX [] <input type="checkbox"/> Other []
On-Site Point of Contact Contact Details	TEL: FAX: Cellphone:

■ Questions

Do you consent to the Sakai Film Office taking photographs of the shoot (without including any of the actors)?	Consent: Yes or No
Will you submit the product of the shoot to the Sakai Film Office?	Consent: Yes or No
Do you agree that the Sakai Film Office should have credit for the production?	Consent: Yes or No
Do you consent to local media being allowed to cover the shoot?	Consent: Yes or No
Will you submit posters, autographs, and other merchandise for the production (when it exists) to the Sakai Film Office?	Consent: Yes or No

Date of application _____
(Days)/(Month)/(Year)

Signature of applicant _____