



BUFFALO NIAGARA FILM OFFICE

TIM CLARK - REGIONAL FILM COMMISSIONER

Horizons Plaza, 140 Lower Terrace, Buffalo, NY 14203 - FilmBuffaloNiagara.com
OFFICE 716-845-2200 - FAX 716-675-3307 - EMAIL Clark@FilmBuffaloNiagara.com

APPLICATION FOR FILM PERMIT

BUFFALO-NIAGARA REGION

PROJECT TITLE

PRODUCER NAME DIRECTOR NAME

CONTACT NAME CONTACT TITLE

CONTACT OFFICE PHONE CONTACT MOBILE PHONE

CONTACT EMAIL CONTACT FAX

PRODUCTION COMPANY NAME

COMPANY STREET ADDRESS

CITY, STATE & ZIP CODE

NAME OF INSURANCE CARRIER PHONE

PROJECT TYPE

Feature Film TV Show Commercial Still Shoot Industrial
 Music Video Short Student Film Other, please explain

ESTIMATED NUMBER OF PRODUCTION DAYS

ESTIMATED NUMBER OF PREP DAYS ESTIMATED NUMBER OF WRAP DAYS

SHOOTING SCHEDULE BY LOCATION (Please attach an additional sheet if necessary)

DATE	LOCATION	START TIME	END TIME

DESCRIBE SCENES (Please attach an additional sheet if necessary)

WILL ANY OF THE FOLLOWING OCCUR? IF SO, PLEASE EXPLAIN.

- | | | |
|--|---|--|
| <input type="checkbox"/> YES <input type="checkbox"/> NO - Special Effects | <input type="checkbox"/> YES <input type="checkbox"/> NO - Pyrotechnics | <input type="checkbox"/> YES <input type="checkbox"/> NO - Child Actors |
| <input type="checkbox"/> YES <input type="checkbox"/> NO - Stunts | <input type="checkbox"/> YES <input type="checkbox"/> NO - Live Burn | <input type="checkbox"/> YES <input type="checkbox"/> NO - Use of Aircraft |
| <input type="checkbox"/> YES <input type="checkbox"/> NO - Gunfire | <input type="checkbox"/> YES <input type="checkbox"/> NO - Use of Animals | |

DETAILS OF ABOVE

WILL YOU BE USING ANY OF THE FOLLOWING EQUIPMENT:

- | | |
|--|--|
| <input type="checkbox"/> YES <input type="checkbox"/> NO - Jib Arm | <input type="checkbox"/> YES <input type="checkbox"/> NO - Tents |
| <input type="checkbox"/> YES <input type="checkbox"/> NO - Dolly Track | <input type="checkbox"/> YES <input type="checkbox"/> NO - Generator |

Other Equipment (explain)

WILL YOU NEED ANY OF THE FOLLOWING:

- | | | |
|--|--|---|
| <input type="checkbox"/> YES <input type="checkbox"/> NO Road Closures | <input type="checkbox"/> YES <input type="checkbox"/> NO Traffic Control | <input type="checkbox"/> YES <input type="checkbox"/> NO Pedestrian Control |
|--|--|---|

ESTIMATED NUMBER OF CAST & CREW

ESTIMATED NUMBER OF VEHICLES:

Personal Cars Equipment Trucks Passenger Vans Camera Car Picture Cars

Motor Homes Dressing Rooms Other Vehicles (explain)

BASE CAMP LOCATION

LODGING LOCATION (for out of town crew)

WILL YOU BE USING LOCAL CREW OR CAST? YES NO

ADDITIONAL INFORMATION

SUBMITTED BY

PRINT NAME TITLE

SIGNATURE DATE

FAX COMPLETED APPLICATIONS TO (716) 675 3307

This is an application only, and **must be submitted with required insurance documents** prior to approval. Thank you for shooting in the Buffalo-Niagara Region.

<input type="checkbox"/> Approved	INTERNAL USE ONLY	<input type="checkbox"/> Denied
Signed by <input type="text"/>		Date <input type="text"/>