

Location Worksheet

TO BE SUBMITTED WITH A STREET USE REQUEST FORM AND A MAP

Production Company: _____ Office Phone: _____
Production Title: _____ Episode No.: _____
Locations Manager: _____ Phone: _____
Location: _____ Date(s): _____
Move in Time: _____ Start Time: _____ End Time: _____ Move out Time: _____
Curfew extension required

SCENES TO BE FILMED

Include detailed description and requirements of scenes (a separate page may be used to replace this section)

SPFX & MISC

Guns / Gunfire Stunts Rain / Snow No. of Picture Vehicles _____
Animals Fire and/or Explosion Other _____ Extras _____

TRAFFIC CONTROL

Street / Lane _____ ITC Closure
(specify east/west and name) applicable
Sidewalk _____ ITC Closure
(specify which) applicable

LIGHTING

Include equipment positions, area to be illuminated, type of light, ancillary equipment (stands, cranes, reflectors, etc.) Include positions on map and attach

CAMERAS

Include equipment positions, ancillary equipment (tripod, dolly tracks, cranes, etc.) Include positions on map and attach

Film Office Coordinator to confirm with Location Manager

PRE-BOOK - OTHER PROXIMAL
& EIC

PREVIOUS COMPLAINT INFO

NEIGHBOURHOOD
& BIA CONTACTS
