

Name of Production Company		
Address		
Production Name		□UNION □NON UNION □STUDENT
Shoot Date(s)		Hours?
Name of Location Contact		Email & Cell
Name of Person Signing the Contract		Email & Cell
Budget for this Location?		
Any Night Shooting? Hours?		Any Set Construction?
Any Special Effects?		Describe
Any Drones; Fog Machines; Gun Fire?		
Any Prep or Wrap Hours/Days Needed?		
Size of Cast & Crew	CAST CREW EX	(TRAS
Number of Vehicles Parking On Site	Cars?	Trucks?
Other Vehicles	Honeywagons; Cube Trucks, Trailer	ed Generators, etc?
Studio Teacher Required?	☐ YES ☐ NO	If So, What Age(s) are the Child(ren)?
Will you need Generators? How Many? \$100/Day + GAS for 6500W \$ 50/Day + GAS for 2000W		
Will you need Bathrooms and Handwashing?	□BATHROOMS □HANDWASHING	How Many of Each?
Briefly Describe Script		
OTHER REQUESTS		