



Inland Empire Film Services

Applicant Information

Company Name: _____ Production Title: _____
Contact Name: _____ Title & email: _____
Address: _____
Street Address

City State ZIP Code

Company Phone: () _____ Cell Phone: () _____
Secondary Contact: _____
Title, Cell & email: _____

Filming Information

Type of Production

- Feature
- TV Episodic
- TV Reality
- Commercial
- Stills
- Documentary/Industrial
- Music Video
- Student
- Other (Specify) _____

Cast & Crew size:

Vehicle Breakdown (# of each)

Cars: _____ Lg. Trucks: _____ RVs: _____ Picture Vehicles: _____
Generators: _____ Camera Cars: _____ Other (specify & #): _____

Location:

Location Name (if applicable): _____
Address: _____
Owner/Rep Name: _____
Owner/Rep Number: _____
Date(s) and time(s) of shoot: _____
Summary of scenes (activity, stunts, SFX, etc): _____

