

Augsburg College
Application for Film/Video Permit or Location Agreement

Name of Project _____

Primary Contact _____

Contact Phone _____

Contact Email _____

Contact Fax _____

Production Company _____

Company Address _____

City/State/Zip _____

Location Manager (LM) or Unit Production Manager (UPM)
(if different from above) LM or UPM _____

Phone number _____

Email _____

Fax _____

Production Type

- _____ Feature Film
- _____ Regional/National Broadcast Television
- _____ Print
- _____ Non-Broadcast Video
- _____ Regional/National Commercial
- _____ PSA
- _____ Local Commercial/Print/Broadcast
- _____ Other: _____

Scout Visits Locations are not yet determined and I would like to arrange a scout visit.

Potential Scout Visit dates and times _____

Brief Summary of Project Locations Requested Prep Date/Time Shoot Date/Time Strike Date/Time

Total number of cast/crew (not including extras) _____

Number of Extras _____

Number of vehicles that will need parking or access to campus locations _____

Will the production involve any of the following:

_____ Loud Noise

_____ Driving Shots

_____ Nudity

_____ Firearms/Weapons

_____ Special Effects (describe) _____

List any special requests involving set dressing and/or potential changes to the location Attach a complete script and/or storyboards to this form.

Submitted by: _____

Authorized Signature _____

Date _____

Print Name _____

Title _____

News and Media Services _____

Signature Date _____

Risk Manager _____

Signature Date _____

_____ Proceed with scheduling

_____ Notify of disapproval

Complete and return form to:
Augsburg University, News and Media Services, news@augsborg.edu.