



Filming Permission Application

About
this form

This form is to be used when requesting permission to film within the Mid-Western Local Government area.

1. APPLICANT DETAILS

Title	Given name	Surname
<input type="text"/>	<input type="text"/>	<input type="text"/>
Position		
<input type="text"/>		
Production Company/Organisation name	ABN	
<input type="text"/>	<input type="text"/>	
Address		
<input type="text"/>		
Phone number (Business)	Mobile number	
<input type="text"/>	<input type="text"/>	
Email address		
<input type="text"/>		

2. PRODUCTION CONTACT DETAILS

PRODUCER

Name	Mobile number
<input type="text"/>	<input type="text"/>
Email address	
<input type="text"/>	

PRODUCTION MANAGER

Name	Mobile number
<input type="text"/>	<input type="text"/>
Email address	
<input type="text"/>	

LOCATION MANAGER

Name	Mobile number
<input type="text"/>	<input type="text"/>
Email address	
<input type="text"/>	

3. PRODUCTION DETAILS

Name of Production

Production summary/synopsis/script*

(or upload a pdf here)

Type of Production (please tick appropriate box)

- | | | |
|---|--|---|
| <input type="checkbox"/> Feature | <input type="checkbox"/> TV Drama | <input type="checkbox"/> Documentary |
| <input type="checkbox"/> TV Commercial | <input type="checkbox"/> Corporate Video | <input type="checkbox"/> Short Film |
| <input type="checkbox"/> Music Video | <input type="checkbox"/> Student Film | <input type="checkbox"/> Children's Production |
| <input type="checkbox"/> Infotainment/Travel Show | <input type="checkbox"/> Reality TV | <input type="checkbox"/> Stills shoot/photography |
| <input type="checkbox"/> Other (please specify) | <input type="text"/> | |

4. LOCATION DETAILS (PLEASE PROVIDE DETAILS FOR EACH LOCATION BELOW)

LOCATION 1

Date (including proposed and back up/wet weather date)

Dates of additional bump-in/bump-out (if required)

Time of use (including crew arrival and departure)

From To

Location 1 address

Description of Activities

LOCATION 2

Date (including proposed and back up/wet weather date)

Dates of additional bump-in/bump-out (if required)

Time of use (including crew arrival and departure)

From To

Location 2 address

Description of Activities

LOCATION 3

Date (including proposed and back up/wet weather date)

Dates of additional bump-in/bump-out (if required)

Time of use (including crew arrival and departure)

From To

Location 3 address

Description of Activities

PERSONNEL NUMBERS

Cast Crew Extras

Parking requirements:

No. essential vehicles No. unit vehicles No. private vehicles

* Please attach a list of production vehicles by type, size and registration details

* Please attach a parking plan (including catering and unit base), specifying street location, number of spaces required and any applicable parking restrictions.

[Click here to upload pdf]

Please tick if your shoot involves any of the following

- | | | |
|--|---|--|
| <input type="checkbox"/> Temporary traffic control | <input type="checkbox"/> Street dressing | <input type="checkbox"/> Reconstruction of crime/emergency |
| <input type="checkbox"/> Road closure | <input type="checkbox"/> Cherry pickers/lighting towers | <input type="checkbox"/> Fire effects |
| <input type="checkbox"/> Cast dressed as police/emergency services | <input type="checkbox"/> SFX | <input type="checkbox"/> Low loaders |
| <input type="checkbox"/> Camera crane | <input type="checkbox"/> Car chases/driving sequences | <input type="checkbox"/> Camera track |
| <input type="checkbox"/> Crowd control/security | <input type="checkbox"/> Stunts | <input type="checkbox"/> Generator |
| <input type="checkbox"/> Firearms/gunfire | <input type="checkbox"/> Temporary structures | <input type="checkbox"/> Children |
| <input type="checkbox"/> Smoke effects | <input type="checkbox"/> Scaffolding | <input type="checkbox"/> Animals |
| <input type="checkbox"/> Playback | <input type="checkbox"/> Other | <input type="text"/> |

Please note: Many of the above activities will also require approval to be sought from other statutory authorities eg. Police, RTA, EPA, RSPCA, NSW Office for Children’s Guardian, NSW Fire Brigades, NSW Rural Fire Service, NSW Department of Lands.

If you have ticked any of the above, please give details

5. SUPPORTING DOCUMENTATION

Please tick documents you have attached to your application

- Public Liability Insurance Certificate of Currency*
- Traffic Management Plan (when required)
- Parking Plan
- Authorised Safety Report (when required)
- Community Notification Letter
- Environmental Management Plan (when required)
- COVID Safe Management Plan*

* Mandatory for permission to be granted.