



PERMIT APPLICATION REQUEST

GENERAL PERMIT INFORMATION

Production Title: _____

Type of Production: _____

Production Company Information

Company Name: _____

Phone: _____

Phone: _____

Fax: _____

Street: _____

City: _____

State: _____

Zip Code: _____

Location Manager

Name: _____

Cell: _____

Office: _____

Fax: _____

Email: _____

Producer: _____

1st AD: _____

Permit Service Company Information

Company Name: _____

Representative: _____

Phone: _____

Phone: _____

Fax: _____

Email: _____

Insured Company Information

Company Name: _____

Phone: _____

Phone: _____

Fax: _____

Street: _____

City: _____

State: _____

Zip Code: _____

Location Assistant

Name: _____

Cell: _____

Office: _____

Fax: _____

Email: _____

Director:

Production Manager:



PERMIT APPLICATION REQUEST (Location 1)

Location Description

Type of Location: (home, apt, office, warehouse, etc.) _____

Open: _____ Closed: _____

Address: _____

City: _____ Zip Code: _____

Dates

Prep Date(s) & Time(s):

Filming Date(s) & Time(s):

Strike Date(s) & Times(s):

Hold Date(s) & Time(s):

Equipment on Location

Type	Quantity	Type	Quantity	Type	Quantity
5 or 10 Ton Trucks	_____	Beebe Light/Nite Sun	_____	Camera Cars	_____
Cast/Crew Vehicles	_____	Condors	_____	Cranes	_____
Cube Trucks	_____	Generator	_____	Honey Wagons	_____
Motor Homes	_____	Picture Vehicles	_____	Portable Restrooms	_____
Process Trailer	_____	Scissor Lifts	_____	Semi Trucks	_____
Stakebed Trucks	_____	Vans	_____		_____

Personnel On Location

Type	Quantity	
Audience Members	_____	
Cast	_____	
Crew	_____	
Extras	_____	Where are extras holding? _____



PERMIT APPLICATION REQUEST
 (Location 1)

Filming Activities (brief description)

Gunfire

Shot Type	Load Type	# Takes Per Day	# Times Per Take
___ Automatic	_____	_____	_____
___ Semi Automatic	_____	_____	_____
___ Single Shot	_____	_____	_____
___ Non Gun	_____	_____	_____

Description of Gunfire:

Special Effects

F/X Permit Number: _____

Type	# Takes Per Day	# Times Per Take
___ Breaking Glass	_____	_____
___ Bullets/Squib Hits	_____	_____
___ Bum Barrels	_____	_____
___ Car Explosion	_____	_____
___ Dust Hits	_____	_____
___ Explosion	_____	_____
___ Fire Ball	_____	_____
___ Fire Bars	_____	_____
___ Fire Effects	_____	_____
___ Sparks	_____	_____
___ Other _____	_____	_____

Description of F/X scene:

The City of Lakewood
Department of Planning and Development
12650 Detroit Avenue, Lakewood OH 44107
216.529.6630
Planning@lakewoodoh.net



PERMIT APPLICATION REQUEST
(Location 1)

Base Camp / Crew Parking

Base Camp

Location Type: _____ Address: _____

Crew Parking

Location Type: _____ Address: _____

Posted Parking / Closures

Posting "No Parking" signs:
(please indicate side of the street: N/S-north side, E/S-east side, S/S-south side, W/S-west side, B/S-both sides.)

Lane / Full Closure (Map)



PERMIT APPLICATION REQUEST (Location 2)

Location Description

Type of Location: (home, apt, office, warehouse, etc.) _____

Open: _____ Closed: _____

Address: _____

City: _____ Zip Code: _____

Dates

Prep Date(s) & Time(s):

Filming Date(s) & Time(s):

Strike Date(s) & Times(s):

Hold Date(s) & Time(s):

Equipment on Location

Type	Quantity	Type	Quantity	Type	Quantity
5 or 10 Ton Trucks	_____	Beebe Light/Nite Sun	_____	Camera Cars	_____
Cast/Crew Vehicles	_____	Condors	_____	Cranes	_____
Cube Trucks	_____	Generator	_____	Honey Wagons	_____
Motor Homes	_____	Picture Vehicles	_____	Portable Restrooms	_____
Process Trailer	_____	Scissor Lifts	_____	Semi Trucks	_____
Stakebed Trucks	_____	Vans	_____		_____

Personnel On Location

Type	Quantity
Audience Members	_____
Cast	_____
Crew	_____
Extras	_____

Where are extras holding? _____



PERMIT APPLICATION REQUEST
 (Location 2)

Filming Activities (brief description)

Gunfire

Shot Type	Load Type	# Takes Per Day	# Times Per Take
___ Automatic	_____	_____	_____
___ Semi Automatic	_____	_____	_____
___ Single Shot	_____	_____	_____
___ Non Gun	_____	_____	_____

Description of Gunfire:

Special Effects

F/X Permit Number: _____

Type	# Takes Per Day	# Times Per Take
___ Breaking Glass	_____	_____
___ Bullets/Squib Hits	_____	_____
___ Bum Barrels	_____	_____
___ Car Explosion	_____	_____
___ Dust Hits	_____	_____
___ Explosion	_____	_____
___ Fire Ball	_____	_____
___ Fire Bars	_____	_____
___ Fire Effects	_____	_____
___ Sparks	_____	_____
___ Other _____	_____	_____

Description of F/X scene:

The City of Lakewood
Department of Planning and Development
12650 Detroit Avenue, Lakewood OH 44107
216.529.6630
Planning@lakewoodoh.net



PERMIT APPLICATION REQUEST
(Location 2)

Base Camp / Crew Parking

Base Camp

Location Type: _____ Address: _____

Crew Parking

Location Type: _____ Address: _____

Posted Parking / Closures

Posting "No Parking" signs:
(please indicate side of the street: N/S-north side, E/S-east side, S/S-south side, W/S-west side, B/S-both sides.)

Lane / Full Closure (Map)



PERMIT APPLICATION REQUEST (Location 3)

Location Description

Type of Location: (home, apt, office, warehouse, etc.) _____

Open: _____ Closed: _____

Address: _____

City: _____ Zip Code: _____

Dates

Prep Date(s) & Time(s):

Filming Date(s) & Time(s):

Strike Date(s) & Times(s):

Hold Date(s) & Time(s):

Equipment on Location

Type	Quantity	Type	Quantity	Type	Quantity
5 or 10 Ton Trucks	_____	Beebe Light/Nite Sun	_____	Camera Cars	_____
Cast/Crew Vehicles	_____	Condors	_____	Cranes	_____
Cube Trucks	_____	Generator	_____	Honey Wagons	_____
Motor Homes	_____	Picture Vehicles	_____	Portable Restrooms	_____
Process Trailer	_____	Scissor Lifts	_____	Semi Trucks	_____
Stakebed Trucks	_____	Vans	_____		_____

Personnel On Location

Type	Quantity	
Audience Members	_____	
Cast	_____	
Crew	_____	
Extras	_____	Where are extras holding? _____



PERMIT APPLICATION REQUEST
 (Location 3)

Filming Activities (brief description)

Gunfire

Shot Type	Load Type	# Takes Per Day	# Times Per Take
___ Automatic	_____	_____	_____
___ Semi Automatic	_____	_____	_____
___ Single Shot	_____	_____	_____
___ Non Gun	_____	_____	_____

Description of Gunfire:

Special Effects

F/X Permit Number: _____

Type	# Takes Per Day	# Times Per Take
___ Breaking Glass	_____	_____
___ Bullets/Squib Hits	_____	_____
___ Bum Barrels	_____	_____
___ Car Explosion	_____	_____
___ Dust Hits	_____	_____
___ Explosion	_____	_____
___ Fire Ball	_____	_____
___ Fire Bars	_____	_____
___ Fire Effects	_____	_____
___ Sparks	_____	_____
___ Other _____	_____	_____

Description of F/X scene:



PERMIT APPLICATION REQUEST
(Location 3)

Base Camp / Crew Parking

Base Camp

Location Type: _____ Address: _____

Crew Parking

Location Type: _____ Address: _____

Posted Parking / Closures

Posting "No Parking" signs:

(please indicate side of the street: N/S-north side, E/S-east side, S/S-south side, W/S-west side, B/S-both sides.)

Lane / Full Closure (Map)