



N° :

## Film Permit Request

Fill in the form below

**Title\*:** .....

**Type of film\* :**

- |                 |                          |                    |                          |                       |                          |
|-----------------|--------------------------|--------------------|--------------------------|-----------------------|--------------------------|
| Feature Film    | <input type="checkbox"/> | Medium-length film | <input type="checkbox"/> | Short Film            | <input type="checkbox"/> |
| Television Film | <input type="checkbox"/> | TV Series          | <input type="checkbox"/> | Television Program    | <input type="checkbox"/> |
| Documentary     | <input type="checkbox"/> | Report             | <input type="checkbox"/> | Electronic publishing | <input type="checkbox"/> |

**Commercial:**

- |            |                          |               |                          |       |                          |
|------------|--------------------------|---------------|--------------------------|-------|--------------------------|
| Television | <input type="checkbox"/> | Institutional | <input type="checkbox"/> | Print | <input type="checkbox"/> |
|------------|--------------------------|---------------|--------------------------|-------|--------------------------|

**Regarding commercials and print adverts, please name the advertiser, the types of media broadcasting or any other publishing forms (newspapers, magazines, catalogues, electronic publishing) \*:**

.....

**Photos / Press / Publishing :**

**Other :**

- |                    |                          |                    |                          |           |                          |                       |                          |
|--------------------|--------------------------|--------------------|--------------------------|-----------|--------------------------|-----------------------|--------------------------|
| School /University | <input type="checkbox"/> | Private Collection | <input type="checkbox"/> | Film Clip | <input type="checkbox"/> | Electronic publishing | <input type="checkbox"/> |
|--------------------|--------------------------|--------------------|--------------------------|-----------|--------------------------|-----------------------|--------------------------|

Other  Please specify : .....

**Provisional budget** : .....

**Company\***: .....

**Adress \***: .....

**Zip Code \***: ..... **City\***: .....

**Country\***: .....

**Main Line\***: ..... **Mobile Phone\***: .....

**Email\* :** .....

**Contact\* :** .....

**Location manager's name\* :** .....

**Adress\* :** .....

**Zip Code \***: ..... **City\***: .....

**Country\***: .....

**Main Line\***: ..... **Mobile Phone\***: .....

**Email\* :** .....

**Shooting Schedule\***: .....

**Schedule:** .....

**Location\*:** .....

**Specific requirements:** .....

**Number of people involved in the project \*:** .....

**Hotel accommodation ?\***  Yes  No Other (please specify) .....

**If your answer is « yes », indicate whether the hotel is located\*:**

in Nice  in the Alpes-Maritimes

**Categories\* :**  2 stars  3 stars  4 stars  Residential hotel

**Hotel's name:** .....

**Number of night at the hotel \*:** .....

**Total length of stay (includes extra days apart from shooting days)\*:** .....

**Local technicians recruited\*?**  Yes  No

**If the answer is « yes », specify the number of local technicians required\*:**

**Specific needs:**

**City police required\*:**  Yes  No

**Traffic interruption\*:**  Yes  No

**Vehicles :**

**Car hire for film shooting:**  Yes  No

**Number:** .....

**Equipment vehicles:**  Yes  No

**Number:** .....

Requirements regarding the parking of equipment vehicles)\*:  Yes  No

**Number of equipment vehicles (type and weight)\*:**

Technical trucks / number: \_\_\_\_\_ Size: \_\_\_\_\_ Weight: \_\_\_\_\_

Trailers / number: \_\_\_\_\_ Size: \_\_\_\_\_ Weight: \_\_\_\_\_

Catering services - m3: \_\_\_\_\_  Frame tents - m3: \_\_\_\_\_

Company : \_\_\_\_\_ Company: \_\_\_\_\_

Contact : \_\_\_\_\_ Contact : \_\_\_\_\_

Main line: \_\_\_\_\_ Main line : \_\_\_\_\_

Generators / number: \_\_\_\_\_

**Details regarding parking requirements:** \_\_\_\_\_

Car's for parking space reservation:....  Yes  No

Company : \_\_\_\_\_

Contact : \_\_\_\_\_

Main line: \_\_\_\_\_

**Services required by Studios Riviera \*?**  Yes  No

**If your answer is « yes », please tick the appropriate box(es)\*:**

Set(s)  Office(s)  Storage  Parking space

**Additional information :**

.....

**Mandatory documents :**

- ✓ Insurance policy certificate
- ✓ For those companies that are based in France, please send a Kbis Certificate (not older than three months) and an INSEE certificate.

**\*Mandatory fields. This film request will be examined once this form is dully filled in and includes all the documents required.**

**The signatory hereby confirms that the information stated above is correct and valid. Moreover, the signatory will see to it that the city of Nice as such is duly credited.**

**Date:** .....

**Signature :**