

NEW BEDFORD FILM OFFICE 133 WILLIAM STREET, NEW BEDFORD, MA 02740 Tel: 508-979-1745 Fax 508-991-6200 EXPLORENEWBEDFORD.ORG/FILM

FILM PERMIT REQUEST

PRODUCTION COMPANY INFORMATION

Company Name:

Company Address:

Tel: ______ Email: _____

PROJECT INFORMATION Title of Project: Type of Production: □ Feature □ TV □ Documentary □ Commercial □ Student □ Still Photo □ Video □ Other Please Specify: _____ Filming Dates: ______ Filming Hours: _____ Approximate Budget: _____

PERSONNEL/EQUIPMENT ON LOCATION

,,							
On-Site Conta	ct:	Tel:					
Producer:							
Production Manager:							
Location Manager:							
Principle Talent:							
		Crew Size:					
DESCRIBE ALL EQUIPMENT AND VEHICLES ON LOCATION (Indicate Parking Plans):							
a. Equipment:							
b. Vehicles:							
c. Parking Plar	ו:						



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ADDITIONAL CITY SERVICES REQUIRED

□ Police

🗆 Fire □ Public Works 🗆 Water Dept.

□ Health Dept.

□ Airport

Parks & Recreation □ City Hall

□ Port Authority

Other Please specify: _____

FILM ACTIVITY

LOCATION	DATE(S)	TIME(S)	DESCRIPTION

*Attach additional pages if necessary

Applicant Signature: _____ Date: _____

FOR USE BY NEW BEDFORD FILM OFFICE ONLY									
Permit Fee: \$_		Date:		Permit No.:					
Signature:			Title:						
Insurance:	🗆 Required	□ Not Required	□ Attached						
Comments/Add'l Conditions/Notes:									

Film permit fee schedule: less than 100 people \$75, 100-150 people \$100, over 150 people \$125.

Make check payable to: City of New Bedford Office of Tourism.