



Application Date	
Start Date	
Company	
Project Title	

**DURBAN FILM OFFICE PERMIT APPLICATION FOR FILMING ON MUNICIPAL PROPERTY**

**All permit application forms must be accompanied by a signed copy of the code of conduct, a copy of public liability insurance, a signed indemnity form with a R2 revenue stamp attached and a detailed sketch overleaf.**

Production Company			
			@
Production Manager			@
Location Manager			@
Production Type			
General Description of Scenes to be Filmed			

Location Address					
Dates Required	DDMMYYYY		to	DDMMYYYY	
Call Time	HH:MM	Wrap Time	HH:MM	No. Cast / Extra's	
No. Crew		No. Trucks		No. of Cars	

Please tick if your shoot involves / requires any of the following						
<input type="checkbox"/> Animals	<input type="checkbox"/> Fire effects	<input type="checkbox"/> Smoke effects				
<input type="checkbox"/> Building blackout	<input type="checkbox"/> Firearms/gunfire	<input type="checkbox"/> Snow Effects				
<input type="checkbox"/> Base Camp Space	<input type="checkbox"/> Generator	<input type="checkbox"/> Street Dressing				
<input type="checkbox"/> Camera crane	<input type="checkbox"/> Lighting towers	<input type="checkbox"/> Stunts				
<input type="checkbox"/> Camera track	<input type="checkbox"/> Low loaders	<input type="checkbox"/> Toilets				
<input type="checkbox"/> Cherry pickers	<input type="checkbox"/> Picture Vehicles	<input type="checkbox"/> Traffic Control				
<input type="checkbox"/> Children	<input type="checkbox"/> Road Closure	<input type="checkbox"/> Wet down				
<input type="checkbox"/> Crowd control	<input type="checkbox"/> Scaffolding	<input type="checkbox"/> Neighborhood Notification.				
<input type="checkbox"/> Driving sequence	<input type="checkbox"/> SFX					
Access to location before / after shoot date	YES	NO	Date	DDMMYYYY to DDMMYY	Times	HH:MM to HH:MM
Special Requirements						

**Form completed by:** \_\_\_\_\_ **Signature:** \_\_\_\_\_

**on behalf of (Production Company):** \_\_\_\_\_ **Date:** \_\_\_\_\_

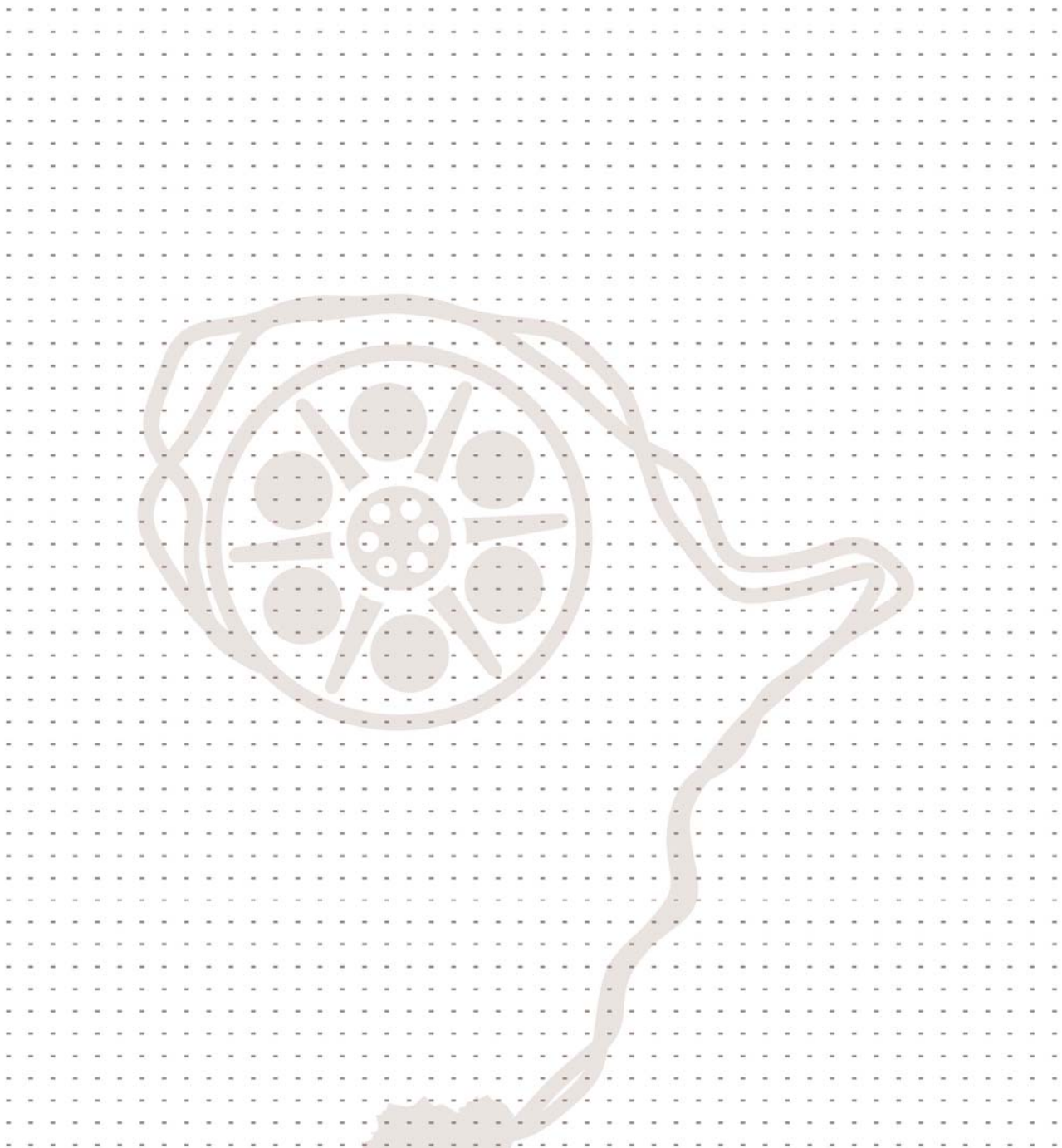
FOR OFFICE USE ONLY:						
Approved	Yes	No	By		Date	DD/MM/YYYY
No. of Officers Provided						
Notes						

Please fax a copy of this completed form to the Film Coordinator, Durban Film Office,  
 11<sup>th</sup> Floor, Rennies House, 41 Margaret Mncadi Avenue, P.O. Box 5856, Durban, South Africa  
 Tel: 27 31 3114243 | Fax: 27 31 311 4092  
 email: [filmdurban@durban.gov.za](mailto:filmdurban@durban.gov.za)  
 web: [www.durbanfilmoffice.com](http://www.durbanfilmoffice.com)



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**DURBAN FILM OFFICE PERMIT APPLICATION MAP FOR FILMING ON MUNICIPAL PROPERTY**



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