## HAYWARD

Project Title:	Estimated Air date, Print Date, and/or Episode # & Title:			
Production Type: (Circle one.)	Student/Non-Profit			
Feature Commercial Television Industrial Music V				
Producer:	Director:			
ODEW				
CREW:	Talanhana			
Location Manager:	Telephone:			
	Cell/Pager:			
	Commagon			
Location Assistant/Scout:	Telephone:			
	Cell/Pager:			
Draduction Managery	Talanhana			
Production Manager:	Telephone:			
	Cell/Pager:			
First Assistant Director:	Telephone:			
	Cell/Pager:			
	JCTION OFFICE			
Local Office Name:				
Local Address:				
City:	State: Zip:			
Local Telephone:	Local Fax:			
DDODUCTION C	OMPANY OFFICE			
Production Company Name.	JIVIFAN I UFFICE			
1 Toddollon Company Name.				
Address:				
City:	State: Zip:			
Telephone:	Fax:			
E-mail:	Website:			

LOCATIONS:								
Location and Address	INT/	Date	Start	End	Special Conditions	Location Contact	Location Contact	
	EXT		Time	Time		Name	Telephone	
	<u> </u>							
*Please list complete information for additional locations on a separate sheet.								
DETAILS:								
Number in Cast:	Number	r in Crev	N:		Proof of Insurance (P	lease attach docu	ımentation.)	
Starring:								
Synopsis:								
, ,								
Police Services:								
Traffic Control:								
Public Services / Parking:								
Parking Diagram Supplied:								
Neighborhood Notification:								
Copy of Letter Supplied:								
Special Effects or Stunts:								
A LPC LLC C								
Additional Information:								
Approval Police Dept	-			Apı	oroval Fire Dept			
Approval Development								
Approval Bovolopinon	. 1 (0 ) 10	, w , tai				7 titorrioy		
On hehelf of misself and any					offiliated with			
On behalf of myself and any agents, employees, and contractors affiliated with  (Production Company), I agree to comply with the Hayward Filming Activities Ordinance and the Filming Permit Terms and								
Conditions, including the Insurance and Indemnification requirements.								
2.2. 2.4.2. 2.4. 2.2.2								
Applicant's Signature, Title						Data		
мррисат s Signature, 1111e						Date		
For office use only.,	ımb anı				Ingua Data			
Approved Permit ID Nu	mver:				Issue Date:		<del></del>	