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EXHIBIT A

Indicate Street Address OR Cross Streets
Please List Locations In Sequence By Date And Time

Title or Product _____

LOCATION: _____

Date & Day of Week: _____ Interior Exterior Both

Start Time: _____ End Time: _____ Cast & Crew On Location _____

Summarized Scenes: _____

Wet Downs Ext. Dolly/Jib Simulated Violence Pyrotechnics Generator

Special Effects/Stunts Production Vehicle Parking (see Exhibit B)

List additional/special equipment here: _____

Police Services: Intermittent Traffic Control Street Closure

Property Owner: _____ Phone#: _____

Business Name: _____ Phone#: _____

Contact: _____ Phone#: _____

LOCATION: _____

Date & Day of Week: _____ Interior Exterior Both

Start Time: _____ End Time: _____ Cast & Crew On Location _____

Summarized Scenes: _____

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Property Owner: _____ Phone#: _____

Business Name: _____ Phone#: _____

Contact: _____ Phone#: _____

Office Use Only: Neighborhood Notification Signature Survey Police Services

Camera: Handheld/Tripod Only May Not Control Sidewalks

Conditions: _____