



APPLICATION FOR VIDEO/CINEMA SHOOTING/PICTORIALS

Date:		
Purpose:		
Project Title:		
Company Name:		
Present Address:		
Phone/Fax Number:		
Contact Person:		
Location:		
Shooting Date/s:		
Assembly Time:	Pull-Out Time:	
Expected Number of People/Crew (Please indicate names):		
1.	11.	
2.	12.	
3.	13.	
4.	14.	
5.	15.	
6.	16.	
7.	17.	
8.	18.	
9.	19.	
10.	20.	
List of Equipment/s to include Watts, Voltage, Electrical Load:		
1.		
2.		
3.		
4.		
5.		
FOR ADMINISTRATIVE USE ONLY	CHARGES TO BE PAID IN ADVANCE	
Approved By: ROLAND S. SALUTEM (Property Manager) Noted By: _____ (President)	Rent	
	Deposit	
	Security	
	Electricity	
	Engineers OT	
	Janitors OT	
	Parking Fees	
	TOTAL (OR NO.)	