



FILMING AUTHORISATION APPLICATION FORM ON A PROPERTY OF THE DEPARTMENTAL COUNCIL OF PYRENEES ATLANTIQUES

- Please fill in one form per location -

The Film agency of the Pyrénées-Atlantiques is at your disposal to study with you the feasibility of your project. We will be your privileged interlocutor throughout your process.

DOCUMENTS TO BE SUPPLIED

- Synopsis/Screenplay
- On-site shooting schedule
- Certificate of insurance for the shoot

CONTACT

Agence du Film Béarn Pays-Basque

Isabelle BREIL – Chef de projets

Tél. 05 59 30 91 18 - 06 08 60 81 80

Email : i.breil@tourisme64.com

1 GENERAL INFORMATION

TITLE :

TYPE (FEATURE FILM, SHORT FILM, ...)

FILM DIRECTOR :

SHOOTING SCHEDULE : FROM ___/___/_____

TO ___/___/_____

PRODUCTION COMPANY :

POSTAL ADDRESS :

POSTAL CODE :

TOWN :

COUNTRY :

TELEPHONE :

EMAIL :

PRODUCER :

INSURANCE COMPANY :
(PLEASE JOIN THE CERTIFICATE OF INSURANCE) :

PERSON IN CHARGE OF THE PROJECT :

FUNCTION :

TELEPHONE :

EMAIL :



2 REQUEST

LOCATION NAME :

LOCATION ADDRESS :

POSTAL CODE :

TOWN :

DATES OF occupancy : from ___/___/___ to ___/___/___

HOURS of occupancy : : from _____ to _____

Technical details :

Maximum crew and cast members on set :

How many vehicles ? (precise type)

Any special requirements ?

Have you got a contact on site ?

If YES : Name and contact details :

Telephone :

Email :

3 AUTHORIZATION (to be filled by the administration)

Avis favorable : OUI NON

Remarques :

Cachet du cabinet

SIGNATURE DU DIRECTEUR DE CABINET

Agence du Film

