



Application for Filming at the Detroit Medical Center

Thank you for considering The Detroit Medical Center for your upcoming project. In order to ensure good service we ask that each production company fill out and submit this request form. Once we receive this form, we will begin the process of obtaining final approvals from all affected areas of the campus. No permission to use the campus should be inferred until this request has been approved and you have been notified of its approval. We thank you for your time in filling this out and look forward to working with you.

Name of Production: _____

Type of Production: _____ Shooting with sound?

Name and address of Production Company: _____

Contact Person's Name: _____

Phone Number: _____

Cell Number: _____

Email Address: _____

Fax Number: _____

Date(s) and times being requested:

Set up: Date: _____ Times: _____

Shoot (crew call to wrap): Times: _____

Strike: Date: _____ Times: _____

On shoot day times:

Truck arrival: _____

Tail Lights: _____

Area(s) and estimated times for each location being requested:

Location 1: _____ Times: _____

Location 2: _____ Times: _____

Location 3: _____ Times: _____

Number of people in:

Cast: _____

Crew: _____

Extras: _____

PARKING /CATERING INFORMATION:

Number and lengths of production vehicle(s) being brought on campus
(please keep in mind that parking space is very limited)

Working Trucks Number: _____ Lengths: _____

Tow Plant Generator Number: _____ Lengths: _____

Condor/Crane Number: _____ Lengths: _____

Caterer Number: _____ Lengths: _____

Stakebeds Number: _____ Lengths: _____

Vans Number: _____ Lengths: _____

Electric carts Number: _____ Lengths: _____

Buses Number: _____ Lengths: _____

Other Number: _____ Lengths: _____

Number of personal vehicles:

Do you need an area for serving the meals?

Do you need an area to hold extras? _____

Will you be using a tent? _____ If so, what size?

MISC. INFORMATION:

What scene numbers will be done here?

Does the scene(s) involve any chase scenes, nudity, pyrotechnics, action scenes, weapons, effects of any kind or loud yelling?

Is there any construction of any kind that would be done?

Are there any known actors in any of the scenes filmed on campus who might attract a large crowd? _____ If so, name of actor(s):

Would you need to use any sort of lift or crane?

If so, please give type, weight and height:

Where would you need to have it placed?

Is there any other large equipment that would need to be brought in?

Would you need air conditioners/blowers/fountains/lights turned off?

If so, which ones and at what times?

SET DRESSING INFORMATION:

Give a complete list of all set dressing that would be done (use additional sheets if needed).

If filming at a swimming pool, please list everything going into the water.

Please fax this entire packet to the Detroit Medical Center, Facilities Engineering and Construction Office at (313) 966-9960 or email to dmanardo@dmc.org in order to initiate this process.