



## Motion Picture Filming and Television Production Permit Application For filming on Regent University Campus

Fill out this form and forward to your instructor for approval. The instructor will forward it to the proper office for further approval and processing.

**Allow 2 weeks for processing.**

Project Title: \_\_\_\_\_

Class: \_\_\_\_\_ Today's Date: \_\_\_\_\_

Class Professor: \_\_\_\_\_ Professor Extension: \_\_\_\_\_

Student Applicant: \_\_\_\_\_ Position on Project: \_\_\_\_\_

Student email: \_\_\_\_\_ Student Phone: \_\_\_\_\_

Production Dates (To be covered by this Permit) \_\_\_\_\_

Hours of Filming (e.g. 730a-10a): \_\_\_\_\_

### 1. Production Type

- Still Photography       Webisode       Narrative Film       Music Video  
 Corporate/Training Video       Documentary  
 Other (Describe): \_\_\_\_\_

2. Total Personnel: \_\_\_\_\_ Total Vehicles/Equipment: \_\_\_\_\_

### 3. Vehicle Detail:

Cars: \_\_\_\_\_ Trucks: \_\_\_\_\_ Generators: \_\_\_\_\_ RVs: \_\_\_\_\_ Other: \_\_\_\_\_

4. Equipment Detail: List all equipment (camera, lights, sound) that will be used for filming:

5. Will there be children under the age of 16 on set?  Yes  No

6. If yes, have you obtained a theatrical permit for the minor?  Yes  No

### 7. Location Shoot Specifics

On the following page, please list the specifics for **each** filming location, including buildings, and exterior structures or pathways that are in the shot composition, and a summary of each shot (including animals, children, stunts, weapons, etc.). Attach additional sheets if necessary.

The following chart is a summary of the information provided above. Please be detailed, an example is given.

Dates(s)	#	Approve/Deny <i>(Office use only)</i>	Location, Activity, Details of Scene	P/F/S *
Oct 1, 2015	Ex		SC Ordinary, upper level: two students will be seated, eating, and discussing a group project they're working on. One student will squirt ketchup on the group notebook.	P: 7:30a F: 8a S: 9a
	1			
	2			
	3			
	4			
	5			
	6			

\*Prep/Film/Strike Time

**8. Filming within the Public Right of Way**

If filming is planned on campus streets, please submit a site plan (campus map) showing location(s) of filming, cast, crew, vehicle(s), and route(s) traveled in order to film a scene. Note: Campus police must be utilized for any filming on campus roads.

\_\_\_\_\_

\_\_\_\_\_

**9. Stunts/Special Effects:** If your project will include stunts or special effects (smoke), please provide detailed Information about the stunts/special effects planned: \_\_\_\_\_

\_\_\_\_\_

**Note:** No pyrotechnics are allowed on campus property. Squibs may be used, but only by a licensed professional.

Licensed Professional: \_\_\_\_\_

Licensed Professional Phone & Email: \_\_\_\_\_

License #: \_\_\_\_\_

**10. Mock Weapons:** Please list any mock weapons to be utilized in your shoot.

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**Note:** University police are required to conduct a weapons check for any filming on campus with mock weapons. If your request is approved, contact Campus Police at 757-226-2075 thirty minutes before your shoot to arrange for an officer to inspect the mock weapon(s). No live weapons are allowed anywhere on Regent University property.

Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Professor's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**Step-by-Step:**

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**Students:** Fill out this form, sign, and submit by email to your instructor for approval. All detail must be included or processing will be delayed. Allow 2 weeks for all processing and approvals.

**Instructors:** Read the form, sign, and submit by email to the proper office for approval and room reservations.

For com arts areas: email to [techscheduling@regent.edu](mailto:techscheduling@regent.edu).

For all other campus areas, email to [adminservices@regent.edu](mailto:adminservices@regent.edu).

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This Section to be completed by University Staff

**ROUTING**

	<b>Yes / No</b>	<b>Signature/Comments/Fees or Conditions</b>
*Police Dept.	<input type="checkbox"/> <input type="checkbox"/>	_____
Admin. Services	<input type="checkbox"/> <input type="checkbox"/>	_____
Tech. Ops.	<input type="checkbox"/> <input type="checkbox"/>	_____

\*Police Dept. approval only required if mock weapons will be used.

**Required Attachments:**

No Special Attachments Required       Traffic Control Plan

**Any Additional Notes or Conditions of Approval:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Permit # RCPD:** \_\_\_\_\_ **Approved by:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**This permit will be effective** \_\_\_\_\_ (Date & Time) **Through** \_\_\_\_\_ (Date & Time)