



Filming Permit Application

Email to tammy.skinner@wilmingtonnc.gov. Questions? Contact (910) 341-4602.

Production Company: _____

Name of Film: _____

Contact Person: _____

Production Address: _____

City: _____ State: _____ Zip: _____

Office Phone #: _____ Mobile Phone #: _____

Fax: _____ Email Address: _____

Type of Filming (check all that apply):

Feature Film TV Movie TV Series Commercial Other

Location (name and address): _____

Film Date: _____ Hours: _____

Prep/wrap outside listed time? Yes No (see page 2, "Additional Information")

In case of inclement weather or other emergency, alternate date will be: _____

Describe scene: _____

Number in Cast: _____ Number in Crew: _____ Number of Extras: _____

Equipment Parking: _____

Base Camp: _____

Crew Parking: _____

Extras Parking: _____

Extras Holding: _____

Catering (include any vehicle parking): _____

Other On-Street Parking: _____

Street Closure Requested? If yes where (please be as specific as possible)*: _____

*Police Officers are required for all street closures.

Intermittent Traffic Control (ITC) and/or Pedestrian Traffic Control (PTC) Requested? If yes where (please be as specific as possible)*: _____

*Intermittent traffic control (ITC) may only be done in 2 – 3 minute intervals.

Police Officers: # needed: _____ hours needed: _____ am/pm to _____ am/pm

Police Cars: # needed: _____ hours needed: _____ am/pm to _____ am/pm

Special Equipment and Placement (generators, condors, etc.): _____

Special Effects (stunts, animals, gunfire, noise, etc.): _____

Special Requests (barricades, alteration to City property, etc.): _____

Moving to another location upon completion? Yes No

If yes, list location: _____

Additional information (include any prep and wrap activities, times, parking): _____