



(Complete this section for **EACH** location requested and attach a detailed map)

**Applicant** (Must match COI): \_\_\_\_\_ **Project Name:** \_\_\_\_\_

\_\_\_\_\_) \_\_\_\_\_  
(Letter) (Name of Location) (Island) (Dates and Time)

**8. DESCRIBE ACTIVITY YOU WILL BE FILMING / TAPING AT THE LOCATION:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**9. TOTAL NUMBER OF PEOPLE (CAST AND CREW) ON LOCATION?** \_\_\_\_\_

**10. DESCRIBE ALL EQUIPMENT AND VEHICLES ON LOCATION** (Indicate Parking Plans):

a. Camera+ Equipment: \_\_\_\_\_

b. # of Vehicles: \_\_\_\_\_ c. Parking Plans: \_\_\_\_\_

(b. or c. cont'd)

**11. ANY USE OF MOTORIZED VESSELS?? YES\* NO**

**\*IF YES--** List all registration #'s below. Must be current (not expired) and match what is listed on your water safety letter:

**12. DESCRIBE ANY USE OF THRILL CRAFTS / PLANES / HELICOPTERS / RECREATIONAL VEHICLES / PYROTECHNICS / SPECIAL EFFECTS / ANIMALS AND / OR ANY OTHER PROPS** (Attach a separate sheet if necessary):

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant / Authorized Signature

\_\_\_\_\_  
Date

**Both production company and its Hawaii representative or agent are responsible for the locations and activities listed herein.**

**FOR USE BY HAWAII FILM OFFICE AND / OR GOVERNMENT AGENCIES**

**SUBMITTED BY:**

\_\_\_\_\_  
Hawaii Film Office Staff Signature

\_\_\_\_\_  
Date

**APPROVED / DENIED BY:**

DOCARE Required : ☐ Yes ☐ No

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Agency

\_\_\_\_\_  
Date

Approved Subject to:

☐ Special / Standard Conditions

☐ General Conditions

☐ Additional Conditions

☐ Obtaining approval from County Gov't. / Federal Gov't. / Private Land Owner

INSURANCE:

☐ Required

☐ Not Required

☐ Attached

☐ On File with the Film Office

SENT TO:

☐ Applicant

☐ DAGS

☐ DLNR (DAR / DOBOR / DOCARE / DOFAW/ LM / NARS/ Parks)

☐ DOT (Air. / Har. / Hwys.)

☐ DBEDT (HCDA/HFO)

☐ Judiciary

☐ UH: \_\_\_\_\_

☐ Other: \_\_\_\_\_

**COMMENTS / ADD'L CONDITIONS / NOTES:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Make Payable To:** \_\_\_\_\_ **Mail/Deliver To:** \_\_\_\_\_

**Fees** \$ \_\_\_\_\_

**FIPAC#** \_\_\_\_\_