



St. Lucie County
Office of the Film Commission
Application for Filming Permit

Permit # _____

Company Information (Liability Insurance for \$1,000,000 naming St. Lucie County as insured must be submitted to the Office of the Film Commissioner.)

Company Name: _____

Company Contact: _____ Title: _____

Address: _____ City: _____

State/Province: _____ Country: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

E-Mail: _____

Production Contact (Permittee shall have on site a responsible representative prior to the production start.)

Production Contact: _____ Title: _____

Address: _____ City: _____

State/Province: _____ Country: _____ Zip: _____

Phone: _____ Fax: _____ Cell: _____

E-Mail: _____

Production Information

Production Title/Product: _____

Type: _____ Language: _____

St. Lucie Residents Employed: Cast _____ Crew _____ Extras _____

Production days in St. Lucie County: _____ Budget for SLC _____

Locations in which the project is being filmed: _____

Starting Dates & Time: _____

Ending Dates & Times: _____

Description of Scenes Filmed in SLC: _____

Technical Information

Road Closings: _____

Pyrotechnics: _____

Animals: _____

Set Construction: _____

Number/Size of Tents: _____

Special Effects: _____

(Additional costs may be required to pay for law enforcement officers/
firefighters/emergency medical staff and/or road or park closures are needed.)

Vehicles

Number of...

Cars: _____ Trucks: _____ Vans: _____ Airplanes/Helicopters: _____

Watercrafts: _____ Motorhomes: _____ Picture Cars: _____

Caters: _____ Generators: _____ Trailors: _____

Other: _____

Filing for a St. Lucie County Film Permit is free. Please submit the application at least five (5) business days prior to filming.

Film Commission: _____ Date: _____

Approved _____ Denied: _____