

CITY OF MONROVIA FILMING SURVEY

<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Production Company & Phone Number
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Location Manager & Cell Phone #
<hr style="border: 0; border-top: 1px solid black; margin-bottom: 5px;"/> Production Manager & Cell Phone #

This FILM SURVEY is designed to garner the support of you or your business, related to the planned filming listed below. We hope to secure your approval by mitigating any concerns and responding to your questions.

The undersigned is the owner/lessee/authorized agent of the real property located at the following address

_____	_____
<i>(Print Name)</i>	<i>(Address)</i>

Name of Business (if applicable): _____

_____ **FILMING THE FOLLOWING PROPOSED ACTIVITIES:**
(Film Production Company / School)

Date: _____ Location: _____ Time(s): _____

Date: _____ Location: _____ Time(s): _____

Date: _____ Location: _____ Time(s): _____

Description of Filming and Parking: _____

Anticipated Impact to the Property Listed Above: _____

Please indicate your response with your initials

_____ **I APPROVE** of this filming and have **NO** Objections to the filming activities listed above.

_____ **I DON'T APPROVE** of this filming and have the following concerns: _____

Signature: _____ **Phone Number:** _____