



PRODUCTION INFORMATION

PLEASE NOTE: THIS FORM MUST BE COMPLETED IN ITS ENTIRETY BEFORE ANY FILMING APPROVALS CAN BE GRANTED

All information gathered herein is confidential and only used for internal statistical reports

Project Title _____ Production Company _____

Address _____ Phone Number _____

Location Manager _____ Email _____

Phone Number (cell) _____

TYPE OF PRODUCTION

Feature Short MOW Doc Commercial Music Video Pilot TV Series Government Student
Other _____

GENRE

Comedy Drama Horror/Mystery Reality Animation Children Lifestyle Training Corporate
Other _____

DISTRIBUTION

Broadcaster _____ Video on Demand (VOD) _____ Web _____

Theatrical Distribution _____ Festivals _____

TIMELINE

Pre-Production _____ to _____ Filming _____ to _____

Anticipated # of days in Ottawa _____

COUNTRY OF ORIGIN

Canada USA Other _____ Co-production _____

BUDGET INFORMATION IN CAD \$ (CONFIDENTIAL-FOR INTERNAL STATISTICS ONLY)

Total Budget _____ Ottawa Spend _____ Ottawa Playing As _____



PERSONNEL

Producer

Scriptwriter

Director

DOP

Principal
Cast