

For information about filming in Ipswich, please refer to Council's film website at www.ipswich.qld.gov.au/filmipswich or phone the Office of Economic Development on (07) 3810 6938.

Note: Submitting an application does not guarantee approval. If approved a licence will be issued.

Please note: The following conditions will apply to any permit issued:

- Unless written consent is obtained, parkland visitors or retailers are not to be approached for inclusion in shots.
- No photo or film may be taken of adults or children engaged in private acts or fully or partially nude.

APPLICANT DETAILS

Full name or company name	
Address	
Postal address (if different from above)	
Contact person (if Company)	Mobile no.
Phone no.	Fax no.
Email	

PRODUCTION DETAILS

Production name	Shooting dates
Location manager	Mobile no.
Synopsis of production	
Additional comments	

PRODUCTION TYPE (eg. Feature film, Documentary etc)

- Feature film
 Television series
 Short film
 Documentary
 Corporate video
 Television commercial
 Still photography
 Music video clip
 Other (please specify)

No. of shooting days	No. of crew	No. of cast
No. and type of vehicles		

Ipswich City Council prides itself on offering its full support to the film and TV industry. To assist Council to estimate the significant economic impact of film and TV projects in the Ipswich region, and to seek greater assistance and funding for various programs, we request the following information:

Estimated budget spend for your Ipswich production

(please note this information is for internal purposes only and the figure provided is not for external publication)

PRODUCTION SCHEDULE

Please attach a site map for each location.

Note: Council is to be immediately informed in writing of any alterations to the filming schedule.

Location 1	
Date required	Times required From _____ To _____
Additional information (eg. wet weather alternatives, set up arrangements)	

Location 2	
Date required	Times required From _____ To _____
Additional information (eg. wet weather alternatives, set up arrangements)	

Location 3	
Date required	Times required From _____ To _____
Additional information (eg. wet weather alternatives, set up arrangements)	

ROADS AND FOOTPATH

A Traffic Control Permit is required for the temporary closure of traffic lanes, shoulders, medians, verges or footpaths.

Please indicate the proposed use in the following table.

TYPE OF USE	PERMIT REQUIREMENTS
<input type="checkbox"/> No use of any part of the roadway or footpath is required <input type="checkbox"/> Use of the footpath allowing full public access	No Traffic Control Permit required
<input type="checkbox"/> Prevent public access to the footpath <input type="checkbox"/> Closure of traffic lanes, shoulders, medians or verges	Traffic Control Permit required

Traffic Control Permits are only issued to companies registered with the Department of Transport and Main Roads Traffic Management Registration Scheme. Application forms are to be completed by a Traffic Control company.

Further information and the Traffic Control Permit Application Form can be found at www.ipswich.qld.gov.au/business/laws_regulations/roads

TRAFFIC CONTROL PERMIT APPLICATION FORM

- Application has been submitted online – Reference Number
- Completed and attached
- Yet to be completed and forwarded to Council – Please complete the details below to assist with prelodgement advice

LOCATION

(Details such as 'various streets' are unacceptable; if more than one street is involved, attach a separate list with full details)

Road/Street	Suburb
Section of road From/near	To

TRAFFIC CONTROL COMPANY

Company name	Phone no.
Application contact name	Phone no.

REQUEST FOR TIMED AND METERED CAR PARKING SPACES

No. of parking spaces required	
Locations of parking spaces	
Vehicle registration numbers	

If unable to provide vehicle registration details at the time of application, details must be provided to Council prior to filming.

ON SITE VEHICLE ACCESS

If you require vehicle access other than on designated roads eg. parks, provide vehicle details.

VEHICLE TYPE	NO. OF VEHICLES	REGISTRATION DETAILS <i>(Provide dimensions and weight if heavy vehicle)</i>
Cars		
Vans		
Trucks		
Other		

SPECIAL REQUIREMENTS *(Tick if applicable and describe)*

<input type="checkbox"/> Night Shoot	
<input type="checkbox"/> Lights	
<input type="checkbox"/> Smoke	
<input type="checkbox"/> Animals	
<input type="checkbox"/> Water	
<input type="checkbox"/> Noise	
<input type="checkbox"/> Explosives/fireworks	

Fireworks are only permissible in specific locations. An appropriately licensed fireworks operator must be responsible for the display.

Name of licenced fireworks operator

<input type="checkbox"/> Other	Please describe and attach any additional information if required
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PROJECT MANAGEMENT ARRANGEMENTS *(Tick if applicable and describe)*

<input type="checkbox"/> Safety Management Plan	
<input type="checkbox"/> Animal Control	
<input type="checkbox"/> Police/Fire/Rescue	
<input type="checkbox"/> Building Approval	
<input type="checkbox"/> Letter Box Drop	
<input type="checkbox"/> Other Publicity	
<input type="checkbox"/> Waste	
<input type="checkbox"/> Toilets	

FEES

No fees are required for a Film Production Licence, however depending on location and complexity, a bond may apply. If a bond is required you will be contacted by an officer from Council's Application Team.

For further clarification, please contact Council's Application Team on (07) 3810 6666.

PUBLIC LIABILITY INSURANCE

The applicant must hold a current Public Liability Insurance (PLI) policy with a minimum cover of \$10 million throughout the permit period.

The insurance company must be licenced to operate in Australia.

A copy of the PLI policy must be submitted with the application.

CHECKLIST

The following documents are to be submitted with your application:

- A copy of the Public Liability Insurance Policy
- Site Management Plan for each location
- Traffic Control Permit application *(if applicable)*
- Resident/Business Notification Letter *(if applicable)*

DECLARATION

I do solemnly and sincerely declare that the information provided is true and correct to the best of my knowledge.

Note: Providing false information may render you liable to legal action.

Signature	Date
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COUNCIL DETAILS

Ipswich City Council
PO Box 191
Ipswich QLD 4305

Phone (07) 3810 6666
Fax (07) 3810 6731
Email council@ipswich.qld.gov.au
Web www.ipswich.qld.gov.au

Privacy Statement

Ipswich City Council is collecting your personal information in accordance with Local Law No. 3 (Commercial Licensing) so that we can assess your application. We will not disclose your personal information outside of Council unless we are required by law or have been given your consent.

By completing and signing this form and returning it to Council, we will consider that you have given us your consent to manage your personal information in the manner described in Council's Privacy Statement, Personal Information Digest and this collection notice.