

**CITY OF NEW ORLEANS
DEPARTMENT OF PROPERTY MANAGEMENT
DIVISION OF CEMETERIES**

COMMERCIAL FILMING REQUEST FORM

Project Name	
Production Company	
Address	
City, State, Zip Code	
Production Representative	
Representative Phone	
Representative Email	
Cemetery	<input type="checkbox"/> Lafayette Cemetery No. 2 <input type="checkbox"/> Valence Cemetery <input type="checkbox"/> Carrollton Cemetery No. 1 ("Green Street") <input type="checkbox"/> St. Mary's Cemetery ("Carrollton Cemetery No. 2")
Type of Project	<input type="checkbox"/> Commercial Film <input type="checkbox"/> Commercial Photography <input type="checkbox"/> Student Project <input type="checkbox"/> Virtual or Social Media Content <input type="checkbox"/> B-Roll Only <input type="checkbox"/> Television Series <input type="checkbox"/> Other (please specify):
Film New Orleans Permit #	
Description of Scene (attach additional pages if necessary)	
Location Date(s)	
Location Time(s)	

Total number of cast/crew and vendors	
Equipment	
Vehicles	

Production crew, transportation crew, and vendors must be familiar with and abide by the Rules and Regulations of the Division of Cemeteries, Film New Orleans Policies and Procedures and Ordinances of the City of New Orleans. The production accepts full responsibility for damages to the cemetery and its facilities and agrees to pay all costs associated with damage as identified by the Department of Property Management.

By signing below, I certify that the information that I provided is accurate and complete to the best of my knowledge and ability.

As a representative of the production I certify that the production, _____, releases the City of New Orleans, the Department of Property Management from any and all liability.

Location Manager/Producer

Production Company

Date