

## Filming / Photography Permit Application Form

Name of park / forest:	
Name of Production Company:	
Name of Production:	
Date(s) of Filming:	Reserve weather day:
Pack out time:	Pack in time:
Key contact person:	
Landline phone:	Mobile phone:
Email:	Fax:
Postal address:	
Other contact(s):	
Activity Description:  1. Where do you propose to film / photograph within the NZMS 260 grid reference)  2. What type of filming / photography are you proposing	
3. What will the film be used for?	
4. Are any animals involved?	Yes □ No □
5. Will any special effects be used?	Yes □ No □
	_

6. Will you be creating "temporary structures" (ie. stages, marquees, props for filmir	ng) on the	Park	(?	
7. How many vehicles will you be using as part of your production? (i.e. 4WD, trucks	5)			
8. How many crew will be involved in the production?				
9. What extra equipment do you propose to bring into the park?				
Access and use of park / forest:				
10. Describe the main access points that you will be using into the Park				
11. Describe the parking areas you propose to use in the Park / Forest				
12. Which park facilities (structures, tracks) do you need to use?				
Activity Impact Assessment:				
13. Will your activity affect public access to other areas of the park?	Yes		No	
14. Will your activity result in any disturbance to native vegetation?	Yes		No	
15. Will natural waterways or bodies of water be affected by your activity?	Yes		No	
16. Is there any risk of fire?	Yes		No	
17. Will your activity cause any noise?	Yes		No	
18. If yes to any of the above, how will you minimise these impacts?				

Health and Safety:						
19. Do you have Public Liability	Yes □ No □					
To what level?						
Please supply proof of your Pu						
20. Do you have Fire Suppress	ion Insurance?	Yes □ No □				
To what level?						
Please supply proof of your Fire Suppression Insurance cover (this may be covered off in your Public Liability Insurance)						
You are required to submit a Health and Safety and Emergency Procedures plan under the Health and Safety Act 1991 for your event. Please present this to the park / forest ranger no later than 10 working days before the date of your event.						
Please indicate whether you co	ollected a "Health and Safety" planning					
Other Information		Have one ☐ Please send ☐				
21. Which term best describes	your company / organisation? (tick one)					
Commercial Comm	unity					
22. Have you obtained any other	er relevant permits from the appropriate	local authority? Yes 🛭 No 🔲				
23. How much ranger time do y	ou require?					
24. What do you need the rang	er to do?					
25. Do you have any other information you wish to supply in support of your application Yes $\square$ No $\square$						
Contact Us:						
Contact Us: Greater Wellington	Greater Wellington	Greater Wellington				
	Greater Wellington Western Sector Principal Ranger	Greater Wellington Eastern Sector Principal Ranger				
Greater Wellington	•	•				
Greater Wellington Wellington Office	Western Sector Principal Ranger	Eastern Sector Principal Ranger				
Greater Wellington Wellington Office PO Box 11646	Western Sector Principal Ranger PO Box 11646	Eastern Sector Principal Ranger PO Box 40847				
Greater Wellington Wellington Office PO Box 11646 Phone 04 384 5708	Western Sector Principal Ranger PO Box 11646 04 237 5793	Eastern Sector Principal Ranger PO Box 40847 04 526 4133				