



**CITY OF SANTA CLARITA
FILM INCENTIVE PROGRAM (FIP)
INCENTIVE 2 APPLICATION**

Date:

SECTION ONE: Production Company/Applicant Information

Name:		
Address:		
City:	State:	Zip:
Phone:	Fax:	Tax ID #:

Primary Production Co./Applicant Contact/Representative

Name:	Title:
Cell:	Phone: Email:

SECTION TWO: Production Information

PERMIT 1 **Santa Clarita Permit #:** _____

Production Title:

Production Type:

Feature Episodic TV TV Pilot TV Movie Commercial Music Video

Total Production Budget:

Principal Photography Start Date: End Date:

Initial Distribution Method:

Theater Television – Channel (i.e. CBS, HBO, Disney): _____

DVD/Video Internet Other: _____

PERMIT 2 **Santa Clarita Permit #:** _____

Production Title:

Production Type:

Feature Episodic TV TV Pilot TV Movie Commercial Music Video

Total Production Budget:

Principal Photography Start Date: End Date:

Initial Distribution Method:

Theater Television – Channel (i.e. CBS, HBO, Disney): _____

DVD/Video Internet Other: _____

PERMIT 3

Santa Clarita Permit #: _____

Production Title: _____

Production Type:

 Feature Episodic TV TV Pilot TV Movie Commercial Music Video

Total Production Budget: _____

Principal Photography Start Date: _____

End Date: _____

Initial Distribution Method:

 Theater Television – Channel (i.e. CBS, HBO, Disney): _____
 DVD/Video Internet Other: _____**PERMIT 4**

Santa Clarita Permit #: _____

Production Title: _____

Production Type:

 Feature Episodic TV TV Pilot TV Movie Commercial Music Video

Total Production Budget: _____

Principal Photography Start Date: _____

End Date: _____

Initial Distribution Method:

 Theater Television – Channel (i.e. CBS, HBO, Disney): _____
 DVD/Video Internet Other: _____**PERMIT 5**

Santa Clarita Permit #: _____

Production Title: _____

Production Type:

 Feature Episodic TV TV Pilot TV Movie Commercial Music Video

Total Production Budget: _____

Principal Photography Start Date: _____

End Date: _____

Initial Distribution Method:

 Theater Television – Channel (i.e. CBS, HBO, Disney): _____
 DVD/Video Internet Other: _____

PERMIT 6

Santa Clarita Permit #: _____

Production Title: _____

Production Type:
 Feature Episodic TV TV Pilot TV Movie Commercial Music Video

Total Production Budget: _____

Principal Photography Start Date: _____ End Date: _____

Initial Distribution Method:
 Theater Television – Channel (i.e. CBS, HBO, Disney): _____
 DVD/Video Internet Other: _____

SECTION THREE: Required Materials

- Completed FIP Application
- Copy of lease agreement or other documentation showing production based at sound stage/movie ranch in SCV for four consecutive weeks
- Synopsis or screenplay, teleplay, or series, or copy of script

SECTION FOUR: Signature

I certify under penalty of perjury under the laws of the State of California that I examined this application, including all attachments and that to the best of my knowledge its content is true and correct.

Signature of Production Company Representative

Date

Printed Name and Title