



**YELLOWSTONE NATIONAL PARK
PERMIT APPLICATION
FILMING, PHOTOGRAPHY AND SOUND RECORDINGS**

FOR OFFICIAL USE
REC'D _____
PERMIT # _____

Date _____

Company _____

Contact on Set _____

Address _____

Title _____

Phone# _____

Fax# _____

Phone# _____

Email _____

Fax# _____

Cell# on Location _____

Federal Tax ID# or _____

Insurance Company _____

Social Security#** (required per the Debt Collection Improvement Act of 1996)

Amount of General Liability _____

Coverage (attach certificate)**

***Federal Tax ID or Social Security number and certificate of insurance issued by a United States Company (generally \$1,000,000 minimum for video and film companies) with the United States Government, National Park Service named as an additional insured are required before a permit will be issued.*

NAME OF PRODUCTION _____

NUMBER OF DAYS ON SITE Scout _____ Shoot _____

DETAILED DESCRIPTION OF ON-SITE ACTIVITIES _____

DETAILED DESCRIPTION OF FINAL PRODUCT *(describe story line; attach storyboards, treatments or scripts when appropriate)*

PURPOSE *(provide full description of use and outlet for final product)* _____

AIR DATE *(if applicable)* _____

DO YOU INTEND TO USE PROPS? Yes No

If yes, provide a full description of props and how, when and where they will be used _____

DO YOU INTEND TO UTILIZE TALENT? Yes No

**"Talent" comprises anyone in front of the camera (regardless of whether interviews are taking place) and includes, but is not limited to, National Park Service (NPS) and concessioner staff, volunteers, researchers, cooperators, park visitors, presenters, hosts, correspondents, models, etc.*

If yes, provide a full description of talent, who they are and how they will be utilized _____

SHOOTING SCHEDULE BY LOCATION (Filming locations must be specified in advance of filming. A location scout is strongly recommended in order to provide a specific schedule by date. If a specific schedule is not provided at least five (5) business days prior to your first scheduled day on location, a National Park Service representative will be assigned to monitor **all** filming activities at a rate of \$65.00/hour).

DATE	SPECIFIC LOCATION	START TIME	END TIME	TALENT*		SCOUT	SHOOT
				YES	NO		

DO YOU INTEND TO USE AIRCRAFT? Yes No

If yes, name of airplane/helicopter charter company _____

DATE	SPECIFIC LOCATION	START TIME	END TIME

ACCOMMODATIONS (List all accommodations, including campgrounds, in which you will be staying during your filming in the park. Include telephone and fax numbers, along with the name of the person holding the reservations):

DATE	NAME OF HOTEL/MOTEL, ETC.	PHONE	FAX	NAME(S) ON RESERVATION(S)

Person on location responsible for company's adherence to all terms & conditions of film permit:

Name: _____ Title: _____ Phone: _____

Person on location responsible for coordinating activities with the National Park Service:

Name: _____ Title: _____ Phone: _____

Person at the company office to relay messages to the crew while on location:

Name: _____ Title: _____ Phone: _____

Person at the company office to contact for follow up information and billing:

Name: _____ Billing address: _____

Title: _____

Phone: _____

I hereby state that the above information given is complete and correct, and that no false or misleading information or false statements have been given. All estimates are reliable to the best of my knowledge and I have the full authority to represent the applicant/production company and the project described above.

Print name: _____ Signature: _____

Date: _____ Title: _____

The information provided above will be used to determine whether a permit will be issued. ALL PARTS OF THE APPLICATION MUST BE COMPLETED BEFORE A PERMIT WILL BE CONSIDERED. Applications are reviewed on a first-come, first-served basis. Please mail the completed form along with a check or money order to cover the non-refundable permit processing fee in the amount of \$200.00 to Film Permit Coordinator, Public Affairs Office, P.O. Box 168, Yellowstone National Park, Wyoming 82190. You may charge the application fee to a credit card by completing the information requested below. Completed applications must be received in the Public Affairs Office at least two weeks prior to your proposed filming dates. Please direct questions to the Film Permit Coordinator at (307) 344-2012. Fax 307-344-2014.

PLEASE CHARGE THE \$200.00 NON-REFUNDABLE APPLICATION FEE TO MY (CHECK ONE):

Visa MasterCard American Express Discover # _____

Expires _____ Signature _____