

Please complete this form and email to CommercialFilming@transport.nsw.gov.au
 If your filming application is approved, Special Events will ask you to complete a *Film Release Agreement*, *Safe Work Method Statements*, and submit a letter of acceptance of the filming charges agreed upon between Sydney Trains and the applicant.

Applicant details

Company name:		Applicant name:	
Address:			
Phone (w):	Phone (m):	Fax:	
Email:		ABN:	

Production details

Type of filming: *(Please tick all that are applicable)*

- Moving images
 Still photography
 Stills photography and moving images

Purpose of filming: *(Please tick all that are applicable)*

- News/current affairs documentary
 Travel and lifestyle feature or short film
 Advertising television drama or infotainment
 Education *(TAFE, university, student productions)*
 Music videos and corporate videos
 Research: *(Please specify)*
 Other: *(Please specify)*

Distribution *(Please tick all that are applicable):*

- Television
 Cinema
 Internet
 Print
 Other: *(Please specify)*

Production title:

Locations:

Number of cast: *(Please specify the exact number)*

Cast:	Crew:	Extras:	Total:
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Intended dates/times of filming: *(Please note Sydney Trains are unable to accommodate filming and photography requests during peak periods: 4.00am to 10.00am and 2.00pm to 8.00pm Monday to Friday)*

(NB: Weekend rates are flexible and subject to major events taking place)

Summary of scene(s) to be filmed:

- I have attached a detailed synopsis of the scripts/scenes or story boards, clearing identifying any inappropriate, unsafe or reputational risk material.
 I have attached additional material to support my application.

Insurance details

Name of company:	Amount:
Policy no.:	Expiry date:
Agent:	
<input type="checkbox"/> I have attached a copy of Certificate of Currency Public Liability Insurance for a minimum of \$20 million dollars, with 'Rail Corporation New South Wales' nominated on the policy as an interested party.	
Signature:	Date: / / day month year

OFFICE USE ONLY

Low Impact Shooting Medium Impact Shooting High Impact Shooting

Low Impact Shooting <input type="checkbox"/> Approved <input type="checkbox"/> Not approved	Manager, Special Events Signature:	Date: / / day month year
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Medium Impact Shooting <input type="checkbox"/> Approved <input type="checkbox"/> Not approved	General Manager, Operations Signature:	Date: / / day month year
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High Impact Shooting <input type="checkbox"/> Approved <input type="checkbox"/> Not approved	Executive Director, Operations Signature:	Date: / / day month year
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	Communications Manager Signature:	Date: / / day month year
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