**FILM SHOOTING APPLICATION FORM**

* Name of Production Company: __________________________________________________________

* Address: __________________________________________________________________________

* Country: __________ * Producer: ______________________________________________________

* Contact Person: __________ * Tel: __________ Mobile: ____________________________

* Fax: __________ * Email: __________ Website: ____________________________

Local Agent: __________ Tel: __________ Mobile: ____________________________

* Production Title: _____________________________________________________________

* Production Type: Animation ☐ Commercial ☐ Corporate/Industry Film ☐

Documentary ☐ Feature Film ☐ Music Video ☐ Photographic Shoot ☐

Song sequence ☐ TV Programme ☐ Other/Specify ☐ ✓ Tick as appropriate

How did you come to know about MFDC _____________________________________________

* Description /Story line:

________________________________________________________________________________

* Duration: __________ * Format: __________ Diffusion: __________

* Period of Shooting – As from ___/___/____ to ___/___/____

* No of persons in film crew: _______ Principal Cast: _____________________________

* Budget: _____ US$/Euro/MRU * Estimated expenses in Mauritius: _____US$/Euro/MRU

Your requests, comments, or questions:

________________________________________________________________________________

I/ We agree the above information to be true and to comply with the rules & regulations of film

shooting in the Republic of Mauritius.

* Name of applicant(s): ________________________________

* Date: ____/____/____

* denotes mandatory fields

* Signature(s): __________________

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