



**Town of Cohasset, MA**  
**Filming General Information Checklist**

**General Permit Information**

Production Title: \_\_\_\_\_

\_\_\_\_\_

Type of Production: Commercial; PSA; Documentary; Feature; Industrial Video; Music Video; Special Event; Still Photo; Student; Miscellaneous; Other: \_\_\_\_\_

**Production Company Information**

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**Insured Company Information**

Company Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: \_\_\_\_\_

Street: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_

Zip Code: \_\_\_\_\_

**Location Manager**

Name: \_\_\_\_\_

Cell: \_\_\_\_\_

Office: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Producer: \_\_\_\_\_

1<sup>st</sup> AD: \_\_\_\_\_

**Location Assistant**

Name: \_\_\_\_\_

Cell: \_\_\_\_\_

Office: \_\_\_\_\_

Fax: \_\_\_\_\_

E-mail: \_\_\_\_\_

Director: \_\_\_\_\_

Production Manager: \_\_\_\_\_

**Filming Information Location Checklist**  
*(Please use additional copies for each location as needed)*

**Location Description**

Type of location:       Open: \_\_\_\_\_ Closed: \_\_\_\_\_

Address: \_\_\_\_\_

Prep Date(s) & Time(s): \_\_\_\_\_

Filming Date(s) & Time(s): \_\_\_\_\_

Strike Date(s) & Time(s): \_\_\_\_\_

Hold Date(s) & Time(s): \_\_\_\_\_

**Equipment on Location**

Type	Quantity	Type	Quantity	Type	Quantity
5 or 10 Ton Trucks	_____	Beebe Light/Nite Sun	_____	Camera Cars	_____
Cast/Crew Vehicles	_____	Condors*	_____	Cranes	_____
Cube Trucks	_____	Generator	_____	Honey Wagons	_____
Motor Homes	_____	Picture Vehicles	_____	Portable Restrooms	_____
Process Trailer	_____	Scissor Lifts	_____	Semi Trucks	_____
Stakebed Trucks	_____	Vans	_____		

\*Condor = Aerial work platforms

**Personnel on Location**

Type                           Quantity

Audience Members     \_\_\_\_\_

Cast                           \_\_\_\_\_

Crew                           \_\_\_\_\_

Extras                        \_\_\_\_\_

Where are extras holding? \_\_\_\_\_

**Filming Activities**

**Gunfire**

Shot Type	Load Type	# Takes Per Day	# Times Per Take
_____ Automatic	_____	_____	_____
_____ Semi Auto	_____	_____	_____
_____ Single Shot	_____	_____	_____
_____ Non Gun	_____	_____	_____

Description of Gunfire:

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**Special Effects**

Type	# Takes Per Day	# Times Per Take
_____ Breaking Glass	_____	_____
_____ Bullets/Squib Hits	_____	_____
_____ Bum Barrels	_____	_____
_____ Car Explosion	_____	_____
_____ Dust Hits	_____	_____
_____ Explosion	_____	_____
_____ Fire Ball	_____	_____
_____ Fire Bars	_____	_____
_____ Fire Effects	_____	_____
_____ Sparks	_____	_____
_____ Other	_____	_____

Description of F/X scene: \_\_\_\_\_

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**Base Camp/Crew Parking**

Base Camp

Location Type: \_\_\_\_\_

Address: \_\_\_\_\_

Crew Parking

Location Type: \_\_\_\_\_

Address: \_\_\_\_\_

**Posted Parking/Closures**

Posting "No Parking" signs: please indicate which side of the street: N/S-north side, E/S-east side, S/S-south side, W/S-west side, B/S-both sides

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**Town of Cohasset Contact Information**

41 Highland Avenue  
Cohasset, MA 02025  
781-383-4100 x 101

**Police Department**

Chief William Quigley - 781-383-1055

**Fire Department**

Fire Chief – Robert Silvia – 781.383.6154

**Harbormaster**

Harbormaster – Lorren Gibbons -

**Public Works**

Dept. of Public Works Director – Brian Joyce - 781-383.4100 Ext. 120

**Town Manager's Office**

Christopher Senior – Town Manager – 781.383.4100 x 101 – [cseior@cohassetma.org](mailto:cseior@cohassetma.org)

Jennifer Oram – Assistant to the Town Manager [joram@cohassetma.org](mailto:joram@cohassetma.org)

Tracey Connors – Executive Assistant to the Town Manager [tconnors@cohassetma.org](mailto:tconnors@cohassetma.org)