

Falls Creek Resort Management  
Commercial Filming Application Form

To Conduct Specified Commercial Filming in Falls Creek Alpine Resort

Crown Land (Reserves) Act 198 Section 17b  
And Alpine Resorts (Management) Act 1997 Section 39  
Filming Approval Act 2014

Please complete this form and return to the FCRM Office (PO Box 50, Falls Creek, 3699, by fax on 03 5758 1200).

Please note: all applications are subject to a 7 day processing period.

**Applicant Details**

Company Name \_\_\_\_\_  
Name: \_\_\_\_\_  
Position/Title: \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_

Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

**Onsite Contact on Day of Filming**

Name: \_\_\_\_\_  
Position/Title \_\_\_\_\_  
: \_\_\_\_\_  
Mobile: \_\_\_\_\_  
Email: \_\_\_\_\_

**Billing Information (if required)**

Billing Contact \_\_\_\_\_  
Billing Address \_\_\_\_\_  
ABN \_\_\_\_\_  
Phone \_\_\_\_\_

Email \_\_\_\_\_

**Production Information**

Project Name \_\_\_\_\_

**Production Type**

Feature Film

TV or One-off Series

Short Film

Student Film

TVC

Other (please specify) \_\_\_\_\_

**Proposed Dates**

Date in: \_\_\_\_\_

Date out: \_\_\_\_\_

Filming Times: \_\_\_\_\_

**Exact Location of Filming**

\_\_\_\_\_  
\_\_\_\_\_

**Brief Summary of Synopsis of the Scene Activity**

\_\_\_\_\_

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**Number of People on Location**

Staff: \_\_\_\_\_

Crew: \_\_\_\_\_

**Vehicles**

Number of Vehicles used: \_\_\_\_\_

Trucks over 4.5 tonnes: \_\_\_\_\_

Will the Production Need a Unit Base?

YES     NO

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If Yes, location of Unit Base

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**Will the filming require any temporary structures?**

YES     NO

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If Yes, location of temporary structures

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**Will the filming require any traffic or pedestrian management?**

YES     NO

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If Yes:

Type of management required: \_\_\_\_\_  
\_\_\_\_\_

Company providing management: \_\_\_\_\_

Date of requirement management: \_\_\_\_\_

Time/s of required management: \_\_\_\_\_

**Public Amenity**

Will the filming involve any of the following:

- |   |  |
|---|--|
| <input type="checkbox"/> Firearms/weapons               | <input type="checkbox"/> Stunts                          |
| <input type="checkbox"/> Create an environmental impact | <input type="checkbox"/> Any other offence to the public |
| <input type="checkbox"/> Amplified music or sound       | <input type="checkbox"/> Any other safety issues         |
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**Details of Public Amenity activity:**

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**Will the Filming identify Falls Creek through branding or identifiable locations?**

- YES     NO
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If Yes, please provide details:

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**PLEASE ATTACH THE FOLLOWING INFORMATION TO YOUR APPLICATION**

- Proof of Public Liability Insurance (\$20M)
  - Traffic Management Plan (if required)
  - Site Map
  - Running Sheet
  - Stakeholder Communication Plan (if required)
  - Risk Management Plan
  - Other permits/approvals if required
-

\_\_\_\_\_

Victorian Screen Industry Code of Conduct (optional)

Signed Falls Creek Alpine Resort Short Term Authority

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**DECLARATION**

I hereby declare the above information is an accurate representation. If any of the information provided, or any other relevant information that will affect the filming or impact in anyway the Falls Creek Alpine Resort, I will declare it to Falls Creek Resort Management in a timely manner prior to the dates specified for filming.

Signature of Applicant: \_\_\_\_\_

Name of Applicant: \_\_\_\_\_

Date: \_\_\_\_\_