

PROD. NUMBER	PRODUCTION TITLE			
INFORMATION ABOUT PROPOSED WEAPON USE				
Date(s) and time(s) of proposed use				
Location address(es) of proposed used (indicate whether INT or EXT)				
Armorer/weapon handler				
Type of proposed weapon(s) (make and model)*				
Describe full extent of use, including how each weapon will be handled and displayed each day and at each location (be specific; attach additional sheet if needed).				

*All prop firearms must be non-firing. No live ammo will be on set. Weapons must not be capable of loading nor firing ammo of any sort. Weapons must be kept in secured cases away from set when not in use.

NAME OF REQUESTER	POSITION	SIGNATURE	DATE		
LOCAL LAW ENFORCEMENT APPROVAL:					
RCVD ON:	BY:	RVWD ON: BY:			
APPRVD:	COND APPRVD:	DISAPPRVD:			
AUTHORIZATION ISSUED BY:	ON:	TO:			