## MIAMI SHORES VILLAGE FILM LICENSE APPLICATION

| Name/Addre               | ess of Production Company:                                     |      |
|--------------------------|--|------|
| Name of Per              | rson Completing Application:                                   |      |
|                          | n Address:   |      |
|                          | ner Name:  |      |
|                          | ate & Hours of Filming:  |      |
|                          | o be Used in Filming:  |      |
| Number in C              |  |      |
| Type & Desc              | cription of Production:  |      |
|                          |  |      |
| <br>Additional In        | formation:   |      |
|                          |  |      |
|                          | I that all film activities license dance with all Miami Shores | 9    |
| Applicant Name/Signature |  | Date |
| Return To:               | Barbara Estep, MMC<br>Village Clerk<br>Miami Shores Village    |      |

Phone: 305-795-2207 Fax: 305-756-8972

E-Mail: estepb@miamishoresvillage.com