



Fax Cover Sheet

Paramount Pictures
5555 Melrose Ave., Trailer 9
Los Angeles, CA 90038
Phone: 213-956-5388
Fax: 213-862-1200

DATE: 1-16-96

17

TO: Donna Washington FAX #: (213) 962-4966

FROM: G. Alpert

RE: Permit Fax Request

OF PAGES INCLUDING COVER SHEET: (3)

MESSAGE: Hi! Hope all is well. I broke down the location into loc. 1+2. Same place - The LA Memorial Coliseum. loc #1 is the yard level & loc. #2 is inside the arena. Should I keep them separate? Talk to ya soon.

If there is a problem with this transmission, please call 213-956-5388.

Thanks!

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COUNTY & CITY OF LOS ANGELES
FILMING PERMIT REQUEST

DATE: 1-16-96

PAGE 1 OF 2 PAGES

E.I.D.C. - LOS ANGELES FILM OFFICE
6922 Hollywood Blvd., Suite 602, Los Angeles, CA 90028

FAX THIS REQUEST TO: (213) 962-4966
If you have trouble with transmission, phone: (213) 957-1000

PLEASE NOTE THE FOLLOWING:

- 1) YOUR LA CITY, LA COUNTY AND/OR E.I.D.C. INSURANCE ENDORSEMENT MUST BE CURRENT AND ON FILE.
- 2) THIS REQUEST FORM DOES NOT CONSTITUTE A PERMIT.
- 3) TYPE OR PRINT CLEARLY.
- 4) NAME OF APPLICANT MUST BE THE SAME AS APPEARS ON YOUR INSURANCE FORM(S).
- 5) YOU MUST ENTER YOUR FAX NUMBER IN SPACE PROVIDED.
- 6) LOCATIONS AT CITY OR COUNTY FACILITIES MUST INCLUDE PREP AND STRIKE DATES & TIMES.
- 7) THIS FORM CANNOT BE USED FOR STREET/LANE CLOSURES. PLEASE REFER TO INSTRUCTIONS.

Applicant (Company Name): PARAMOUNT PICTURES Agency _____

Representative: KEN LAVET / GREG ALPERT Phone: (213) 956-5388

Fax: (213) 862-1200 Pager: (213) 303-3990 Mobile: () _____

Prod. Title: _____

Type of Prod.: FEATURE TV SERIES () TV MOVIE ()
COMMERCIAL () MUSIC VIDEO () STILL PHOTO () OTHER _____

Producer: Debra Hill Director: John Carpenter

Prod. Mgr.: David Witz 1st A.D.: CHRISTIAN P. DELLA PENNA

Lg. Trucks: 20 Other Trucks: 5 Vans: 4 Mtr. Hms./Dr Rms.: 5 Generator: 2 443 LOC#2

Camera Cars: _____ Pic. Vehicles: 12 Cast/Crew Cars: 125 Crew: 99 Cast: 5 Extras: 100 LOC#1

LOC#: 1 Type of structure LA MEMORIAL COLISEUM Open to public _____ Closed to public

Address [Include Street type (St. Ave. etc.) & Thomas Bros map book Pg. & Grid]: WHILE COMPANY IS PRESENT.

3939 So. Figueroa St. YARD LEVEL Gate 22+23 [T.B. PG. 674-B2]

Date(s): 1/25 To 1/26 Time: 4³⁰ P To 7⁰⁰ A Note: Please indicate arrival and departure times. Time should be military time (ie: 0700-1700).

Summary of Scenes: EXT. DIALOGUE, STUNTS, EXPLODING CAR

ITC: NONE ANIMALS - TYPE(S): _____ NUMBER: _____

Gunfire: YES NO () HRS. REQUESTED 4³⁰ P TO 7⁰⁰ A AUTOMATIC: SINGLE SHOT: ()

LOAD: FULL 1/2 () 1/4 ()

Special Effects: YES NO () FX#: 11085 SQUIBS/BULLET HITS: EXPLOSION:

FIRE EFFECTS: SPARK EFFECTS: () OTHER: BUM BARRELS, CAMP FIRES, TORCHES, MORTERS

Streets to be Posted (Include Thomas Bros. map book Pg. & grid): SMOKE EFFECTS, WET DOWN

NONE

COUNTY & CITY OF LOS ANGELES
FILMING PERMIT REQUEST

DATE: 1-16-96 (additional locations - this form to be used when 2 or more locations are requested) PAGE 2 OF 2 PAGES

LOC#: 2 Type of structure LA MEMORIAL COLISEUM Open to public Closed to public

Address (Include Street type (St. Ave. etc.) & Thomas Bros map book Pg. & Grid): 3939 So. Figueroa St. INT. ARENA [T.B. PG. 674-B2] WHILE COMPANY IS PRESENT

Date(s): 1/29 To 2/2 Time: 4³⁰P To 7⁰⁰A Note: Please indicate arrival and departure times. Time should be military time (ie: 0700-1700).
EXCLUDING WEEKENDS

Summary of Scenes: EXT. DIALOGUE, STUNTS

ITC: NONE ANIMALS - TYPE(S): _____ NUMBER: _____

Gunfire: YES NO HRS. REQUESTED 4³⁰P TO 7⁰⁰A AUTOMATIC: SINGLE SHOT:
LOAD: FULL 1/2 1/4

Special Effects: YES NO FX#: 11085 SQUIBS/BULLET HITS: EXPLOSION:
FIRE EFFECTS: SPARK EFFECTS: OTHER: BUM BARRELS, CAMP FIRES, TORCHES,

Streets Posted (Include Thomas Guide PG/GRID): NONE SMOKE EFFECTS

LOC#: _____ Type of structure _____ Open to public closed to public

Address (Include Street type (St. Ave. etc.) & Thomas Bros map book Pg. & Grid): _____

Date(s): _____ To _____ Time: _____ To _____ Note: Please indicate arrival and departure times. Time should be military time (ie: 0700-1700).

Summary of Scenes: _____

ITC: _____ ANIMALS - TYPE(S): _____ NUMBER: _____

Gunfire: YES NO HRS. REQUESTED _____ TO _____ AUTOMATIC: SINGLE SHOT:
LOAD: FULL 1/2 1/4

Special Effects: YES NO FX#: _____ SQUIBS/BULLET HITS: EXPLOSION:
FIRE EFFECTS: SPARK EFFECTS: OTHER: _____

Streets Posted (Include Thomas Guide PG/GRID): _____