



Date Submitted: _____ (*must be at least 3 business days prior to date needed*)

Filming Project Name: _____

Filming Project Address: _____

Company: _____ Contact Name: _____ Phone: _____

Phone: _____ Fax: _____ E-mail: _____

Complete Mailing Address: _____

Project Manager's Name: _____ Phone: _____ E-mail: _____

On Site (24 hour contact): Name: _____ **Mobile #:** _____

On site (24 hour contact): Name: _____ **Mobile #:** _____

Explanation: 1) What type of work is being conducted? 2) Reason why work cannot be completed during normal working hours.

Date(s) Waiver is needed: _____ Hours Waiver is needed: _____
(i.e.: March 10-14) (i.e.: 8:00 pm – 11:00 pm)

Please submit request to the area NET office per instructions attached. If you have any questions concerning the process, contact any NET office in the City of Miami.