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MELBOURNE FILM OFFICE  
REGIONAL VICTORIA FILM LOCATION ASSISTANCE FUND  
**APPLICATION FORM**

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**Production Company**

**Address**

**A.B.N.** (Australian Companies)  **GST registered** Y  N

**Telephone**  **Fax**

**Email**

**Contact Name**

**Position in Company**

**Project Title**

**Project Type** (eg. Feature, Television Series etc.)

**Proposed Filming Dates** Pre  Shoot  Wrap

**Post Start**  **Finish**

**Proposed Regional Shoot Dates**

**Proposed Regional Locations**

**Total budget** \$

**Amount to be expended in Victoria** \$

**Amount to be expended in regional Victoria** \$

**Length of Shoot in regional Victoria** Weeks  Days

**Number of Victorians to be employed on the project**

**Number of Victorian heads of departments to be employed on the project**

**Number of regional Victorians to be employed**

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**CONFIDENTIALITY**

By signing and submitting this application, the applicant acknowledges and agrees that:

- the amount of the grant requested by the applicant;
- the outcome of the application, in particular the amount and terms of any grant provided by Film Victoria; and
- any discussions between the applicant and Film Victoria in relation to the grant (whether before or after the date of this application),

are strictly confidential. The applicant must not disclose or permit the disclosure of any confidential information at any time without Film Victoria's prior written consent. In addition, the applicant must ensure that all contractors and employees working on the project comply with this confidentiality requirement. Film Victoria may revoke any offer for the grant if the applicant fails to comply with these requirements.

**DATE**

**SIGNED FOR ON BEHALF OF THE ABOVE COMPANY BY**

**PRINT NAME**

**POSITION IN COMPANY**

**Forms and attachments must be completed and lodged prior to commencement of pre-production**

**For more information**

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Australia  
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