Location Release

I, _____ _____,_____
Authorized Person Name Official Title

hearby grant _____ the right to photograph, videotape, reproduce, and use the exteriors and interiors of the premises located at _____and to bring personnel and equipment onto the premises for the purposes of videotaping. In addition we give DCTV permission to video tape and photograph all activities and persons participating in he story. We have received a VIDEO & PHOTO RELEASE (on file) that gives _____ the right to use such images for broadcast, web, ..etc and all electronic media.

You may have use the premises on _____, during the hours of ___ a.m. to ___p.m. day month date year

I, represent that I am the owner or authorized representative of the premises, and that I have the authority to grant you the permission and rights herein granted, and that no one else's permission is required.

Address: _____ _____ _____
Street State Zip Code

Email: _____@_____ Tel#: _____/_____/_____

Date: _____/_____/_____
(Month) (Day) (Year)

Signature of Authorized Agent _____

Name of Authorized Agent (Printed) _____