



The St. Lawrence
Seaway Management
Corporation

Corporation de Gestion
de la Voie Maritime
du Saint-Laurent

FILMING REQUEST INFORMATION FORM

Thank you for your interest in filming on St. Lawrence Seaway Management Corporation property.

Please complete this form and return it to media@seaway.ca.

The information provided will be used to conduct an initial review of your request. Submission of this form does not constitute approval to access or film on SLSMC property.

1. Proponent Information

Name of production company / organization:

Company / organization website:

Mailing address:

City

Province / State

Postal / ZIP Code

Country

Primary Contact

Name

Title / Role

Telephone / Mobile

Email

2. Production Information

Production / Project Title:

Type of Production:

- | | |
|---|---|
| ☐ Documentary | ☐ Television / TV Series |
| ☐ Feature Film | ☐ Commercial / Advertising |
| ☐ Educational | ☐ Corporate |
| ☐ Social / Digital Media | ☐ Student Production |
| ☐ Other: _____ | |

Please provide a brief description of the production and its key theme:

Requested SLSMC filming location(s) or facility/facilities:

Map / location image required: Please include a screenshot or image from Google Maps or a similar mapping program clearly identifying the exact location(s) where you propose to film. If more than one location is being requested, please identify each location on the map.

Shot list required: Please include a list of the specific shots and locations you are hoping to capture during filming.

Proposed filming date(s)	Proposed filming time(s)

Are your proposed dates and times flexible?

- ☐ Yes ☐ No ☐ Somewhat

Estimated time required on site, including setup and wrap-up:

Total number of cast and crew (please provide exact count):

Of this total, will all cast and crew require access to the filming location(s)?

☐ Yes

☐ No

If no, please indicate the exact number of people who will require access:

3. Audience and Distribution

Who is the intended audience for the production, and where will it be distributed or shown?

Anticipated audience size or reach:

Expected publication / release date:

4. Description of Filming Activity

Please describe the scenes or activities you propose to film on SLSMC property. Include the type of footage you hope to capture and any specific Seaway operations, structures, vessels or other features you would like to include.

5. Equipment and Special Requirements

Will a drone / Remotely Piloted Aircraft System (RPAS) be used as part of the proposed filming?

☐ Yes

☐ No

☐ Unsure

If yes, please briefly describe the proposed drone activity:

Will you be bringing any specialized equipment, large vehicles, generators, lighting equipment, special effects or other equipment that may require special access or consideration?

☐ Yes

☐ No

☐ Unsure

If yes, please describe:

Are you requesting any assistance from SLSMC?

☐ Access to an SLSMC location

☐ Operational or technical expertise

☐ On-site coordination

☐ Other: _____

☐ No additional assistance requested

Please provide any additional details:

6. Supporting Information

Please attach any information that may assist SLSMC in reviewing the request. This may include:

- production synopsis or treatment;
- script or relevant script excerpts;
- storyboard or shot list;
- examples or links to previous work; or
- other information relevant to the proposed filming.

7. Additional Information

Is there anything else SLSMC should know when considering this request?

8. Applicant Acknowledgement

- ☐ I understand that submission of this form is an initial request only and does not constitute permission to access or film on SLSMC property.
- ☐ I understand that, if the request proceeds, SLSMC may require additional information and documentation before final approval, including proof of insurance, safety and security information, applicable drone certification and a signed waiver.
- ☐ I understand that operational requirements, safety and security take priority and that SLSMC may be unable to accommodate a filming request.

Name 	Title
Signature 	Date

SUBMIT COMPLETED FORM

Please send this completed form and any supporting material to media@seaway.ca