

Production Information Sheet

Costume Rentals Corporation

11149 Vanowen Street
North Hollywood, CA 91605
Tel: (818) 753-3700 Fax: (818) 753-3737

Credit Verified: _____ Purchase Order Required? Yes _____ No _____
By: _____ CRC # _____
Date: _____ Account# _____

Name of Show: _____
() Feature Film () TV Movie () Series () Theatre () Commercial () Photo Shoot Other _____

Production Company: _____
E-MAIL: _____ @ _____

Billing Address: Attn: _____ Phone# _____
Street: _____ Fax# _____
City: _____ ST: _____ Zip: _____

Mailing Address: (if different from above): _____

Costume Designer: _____ Home Phone# _____

Home Address: _____ E-MAIL: _____ @ _____

Costume Office: _____ Phone: _____

Costume Supervisor: _____ Home Phone# _____

Home Address: _____ E-MAIL: _____ @ _____

Costumer(s): _____

Production Accountant: _____ Phone# _____

Parent Company (if applicable): _____

Address: _____ Phone# _____

City: _____ State: _____ Zip: _____

Who is your Distribution Company? _____

Who is Responsible For Final Billing? _____ Phone# _____

If You Do **Not** Have An Account With CRC: Sole Proprietor CDL _____

Corporation Fed ID# _____

Please Specify Length of Rental: 1 Week (or less) _____ Production (up to 16 weeks) _____

Location of Shoot: _____

I Have Read and Agree to Follow Costume Rentals Procedures

Signature: _____ Date: _____

Print Name: _____ Title: _____