



Distant Location Verification

Please complete and fax to: (818) 847-0070

or mail/bring to: Safety Pass, 2800 Winona Avenue, Burbank, CA 91504

Employee Name: _____ Local: _____

SS#: _____

Dates Employee on Distant Location: From: _____ To: _____

Dates Production on Distant Location: From: _____ To: _____

Date Available for Training: _____

Studio/Producing Company: _____

Address: _____

Production Title: _____

Production Address: _____

Producer: _____

Telephone: _____

Cell Phone: _____

Production Office Contact: _____

Production Office Phone: _____

Production Office Fax: _____

Location Contact Information: _____

Location Address: _____

Location Telephone: _____

Location Fax Number: _____

Contact at Location: _____

I, _____, certify that _____
(producer) (employee)

was on distant location as stated above.

_____ Date: _____
(producer signature)