# PERMISSIONS REQUEST FORM – PROP USE

Please complete as much information as possible. We will evaluate your request only if all relevant areas are filled out completely. Please tell us your production deadline for fastest response.

|  |  |  |
| --- | --- | --- |
| Date Submitted |  |  |
| THE WORK YOU SEEK PERMISSION TO USE |
| Title of the book |  |  |
| Author |  |  |
| Edition / ISBN / Publication date |  |  |
| Publisher / Imprint |  |  |
| Any other information that will help us identify the specific cover/edition |  |  |
| PICTURE INFORMATION |
| Picture / Show |  |  |
| Producer / Production Company |  |  |
| Episode / Season |  |  |
| Airdate / Network |  |  |
| YOUR DETAILS |
| Name  |  |  |
| Company  |  |  |
| Address |  |  |
| Phone number  |  |  |
| Fax number |  |  |
| Email address |  |  |
| Notes |  |  |

Please save a copy on your computer and e-mail it to permissions@groveatlantic.com.

Alternatively, you can print this form and fax it to 212.614.7886

We will send you our own Product Release Agreement once we have all relevant information.