

C&S INTERNATIONAL INSURANCE BROKERS, INC.

Cannon's Walk at the South Street Seaport

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**POLICY APPLICATION
TELEVISION**

(Except Movies-Of-Week or Large Mini Series)

PRODUCTION INSURANCE QUESTIONNAIRE

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1. Name of Production Company (Applicant): _____

 2. Address: _____

Email address: _____ Web Address _____
Phone # _____ Fax # _____
 3. Applicant is: _____ Individual, _____ Partnership, _____ Corporation, the officers of which are:
President: _____ Vice Pres.: _____
Secretary: _____ Treasurer: _____
 4. **Title of this production or series of productions.**

 5. **Indicate whether pilot production, special production, regular series of productions or mini-series of productions and show running time (1/2 hour, 1 hour, 90 min., etc.):** _____

 6. **If a series (regular or mini) of productions, indicate number of episodes:** _____

 7. **Format of production(s):** _____

 8. **Shooting schedule:**
 - (a) Rehearsals: Starting Date: _____
 - (b) Principal Photography: Starting Date: _____
Estimated completion date: _____

9. **Gross Negative Cost (each production if series):** _____

10. **Net Insurable Cost (each production if series):** _____
Gross less story, music & post costs

11. **Below-line cost (each production if series):** _____

12. **Estimated Date of Protection Material or Delivery Date:** _____

13. **Location(s) of filming:** _____

14. **Transit Exposures:**

If any overseas shipments state complete details: _____

15. **Who is financing the series?** _____

16. **Has the production(s) been sold, to whom?** _____

17. **List any special insurance requirements:** _____

18. **PROPS, SETS & WARDROBE** LIMIT OF LIABILITY: \$ _____

19. Description and values at risk:

(a) Sets \$ _____	Prop Cars _____
	Antiques _____
	Jewelry _____

2. Any individual items valued in excess of \$25,000? (Explain): _____

Where will these items be kept, how will they be protected and who will be responsible for them?

MISCELLANEOUS EQUIPMENT
(CAMERAS SOUND, LIGHTING, ETC.)

LIMIT OF LIABILITY: \$ _____

1. Description and values at risk:

(a) Cameras \$ _____	Rented or owned? _____
(b) Lighting and electrical \$ _____	
(c) Other \$ _____	

2. Where will equipment be kept and how will it be protected? _____

EXTRA EXPENSE

LIMIT OF LIABILITY: \$ _____

- 1. Estimated time required to reconstruct or replace unusual sets, scenery or equipment _____

- 2. What other studio facilities are or will be immediately available? _____

- 3. Estimated time required to reconstruct or replace Unusual Sets, Scenery or Equipment, etc. in event of total destruction.

PROPERTY DAMAGE LIABILITY

LIMIT OF LIABILITY: \$ _____

- 1. Types of Locations: _____

- 19. Any watercraft, aircraft or other unusual exposures?
If so, describe in detail

20. Provide Payroll & State of Hire

Cast: _____

Crew: _____

Post Production: _____

21. CAST (if Cast Insurance is desired) DIRECTOR: _____

List Principals Contracted for Continuing Roles

	Artist	Age: (Estimated if exact age unknown)
1.	_____	_____
2.	_____	_____
3.	_____	_____
4.	_____	_____
5.	_____	_____
6.	_____	_____

SERIES OF PRODUCTIONS:

Should the number of persons, including the director, participating in continuing roles exceed five (5), an additional premium is charged for each additional person.

22. Does Insured furnish transportation to employees or others? Yes No
Describe distances, frequency and maximum number of people in-group traveling together. Type of transportation furnished. (Bus, air, etc.)

23. (a) If any persons are performing hazardous duties, are they:
 Independent Contractors Employees?
(b) Submit copy of contract with Independent Contractors, &/or evidence of their other insurance coverages by Certificate of Insurance.

24. Has any form of insurance ever been canceled or declined? Yes No?
If yes, explain: _____

25. Previous Insurer: _____ Policy #: _____

26. Previous Loss Experience: _____

<u>Date of</u> <u>Loss</u>	<u>Amount</u> <u>Loss</u>	<u>Type of Loss</u>
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27. Desired Effective Date: _____

28. Desired Term of Policy: _____

Signing this application does not bind the applicant or the Company to complete the insurance, but it is agreed that the information contained herein shall be the basis of the contract should a policy be issued. If any of the above questions have been answered fraudulently, or in such a way as to conceal or misrepresent any material fact or circumstance concerning this insurance or the subject thereof, the entire policy shall be void.

WARRANTY - It is warranted, as a condition of insurance that the Insured will test all camera equipment prior to commencement of principal photography, and, if transit to location is involved, camera equipment will be tested after arrival on location. It is further warranted that the film to be used will be tested by the Insured prior to principal photography.

29. PLEASE PROVIDE INSURANCE OFFICE WITH THE FOLLOWING:

A. **Copy of Synopsis**

B. **Copy of Budget Summary**

C. **Resumes of Producer and Director**

“Any person who knowingly and with intent to defraud any Insurance Company or other person files a statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act; which is a crime.”

I/We have read the above and agree that to the best of my/our knowledge and belief it fully represents the true statement of facts.

Date: _____

Application completed by: _____

Signed By: _____

Print Name: _____

Federal ID. #: _____