

Film Supplemental Application

THIS SUPPLEMENTAL APPLICATION IS ATTACHED TO AND FORMS A PART OF THE CAPMEDIA AND ENTERTAINMENT APPLICATION. IT IS SUBJECT TO THE SAME TERMS AND PROVISIONS INCLUDED IN THAT APPLICATION, INCLUDING THOSE CONCERNING REPRESENTATIONS MADE AND STATED FRAUD WARNINGS.

Applicant Name:	
	(Proposed Named Insured)

A. GENERAL INFORMATION

A.1	Production Title:	
A.2	Select all Production types that apply:	

Production Type	Production Type
<input type="checkbox"/> Direct to DVD / Video	<input type="checkbox"/> Music videos
<input type="checkbox"/> Documentary	<input type="checkbox"/> Radio series
<input type="checkbox"/> Film for full theatrical release	<input type="checkbox"/> Television pilot / special
<input type="checkbox"/> Film for limited theatrical release (25 or less theatre / art houses in the U.S.)	<input type="checkbox"/> Television series
<input type="checkbox"/> Film for television release	<input type="checkbox"/> Theatrical stage production
<input type="checkbox"/> Industrial, commercial or educational (ICE)	<input type="checkbox"/> Webisodes
	<input type="checkbox"/> Other, please describe:

A.3	If a series, what is the number of episodes?	
A.4	Script Writer Name(s):	
A.5	Producer / Executive Producer Name(s):	
A.6	Running Time:	
A.7	Applicant's projected distribution:	
	<input type="checkbox"/> International <input type="checkbox"/> National <input type="checkbox"/> Regional <input type="checkbox"/> Local	

A.8	Distributor:	
	(a) Name:	
	(b) Contract Effective Date:	
	(c) Term of Insurance required by contract:	
A.9	Is Applicant relying on the Fair Use Doctrine?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, please attach a copy of an opinion letter from Applicant's clearance attorney that states they have reviewed the final production and the use of the clip(s) and the work may be released / exhibited without license of the Fair Use Doctrine.	
	If No, please attach a copy of an opinion letter from Applicant's attorney that states they have reviewed the final production and the use of the clip(s), and required permissions/clearances have been obtained for the production prior to the first release/exhibition.	

B. LICENSES / CONSENTS / RELEASES

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B.1	Is the production based on another work? If yes:	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(a) Please provide the name of the author(s) and the title(s) and dates of the publication of the work upon which the production is based:	
	(b) If this production is not entirely original, have copyright reports been obtained?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(c) Are there any ambiguities, gaps or issues in the chain of title (Series of documents / agreements that establish ownership rights in a film and all of its parts)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(d) Has the chain of title of all works on which the production is based been investigated and cleared back to the original copyright owners to determine that all grants or transfers in the chain of title permit you to assign or sublicense the content as incorporated in the production?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	(e) Have the necessary rights from the owners of the other work been obtained?	<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, please submit grant of rights.	
	If No, please provide an explanation of why release is not necessary:	

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B.2	Have written warranties been obtained from all writers and other content providers which indicate that the content they have provided for the production does not infringe the rights of any third party? If Yes, has Applicant obtained a written indemnification for any breach of this warranty?	<input type="checkbox"/> Yes <input type="checkbox"/> No
B.3	Has a written agreement been obtained from all performers or persons appearing in the production consenting to their appearances? If No to both B.2 and B.3 above, will warranties and agreements be obtained prior to first airing, distribution or public display of the production?	<input type="checkbox"/> Yes <input type="checkbox"/> No
B.4	Will any film, video or TV clips or photographs be used in the production? If Yes: (a) Have all licenses and consents been obtained from the copyright owner without rejection and are you authorized to assign or sublicense the licensed materials that are in the production? (b) Does Applicant have the written authorization of any person or entity depicted in the film, video, TV clip or photograph to use their depiction in the Applicant's production and to assign or sublicense that depiction in the production? If No to a. or b. above, will all licenses and consents be obtained prior to the first airing, distribution or public display of the production? If No, please provide details:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

C. MUSIC

C.1	Have the following musical rights been cleared for all music used in the production(s)? (a) Recording and synchronization rights? (b) Performing rights? (c) Right to distribute for all forms contemplated (home, video, DVD, etc)? If No to C.1.(a), (b). or (c), will these rights be obtained prior to first airing, distribution or public display of the Production?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
C.2	Has original music been commissioned for the production(s)? If Yes, has a written warranty of originality and an indemnity against third party claims been obtained from the composer? If No, will a written warranty of originality and an indemnity against third party claims be obtained from the composer prior to the first airing, distribution or public display of the production?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

D. MERCHANDISE INFORMATION

D.1	Will any merchandise be created from the production, i.e. dolls, toys, clothing, etc.? If yes: (a) Please describe all merchandise: (b) What is the expected revenue from merchandise sales?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No
D.2	Have all necessary consents and licenses been obtained from performers, authors, artists, etc. to produce and distribute merchandise?	<input type="checkbox"/> Yes <input type="checkbox"/> No
D.3	Will appropriate trademark and other searches be made before merchandising characters or other matter that might be subject to trademark, unfair competition or other similar claims?	<input type="checkbox"/> Yes <input type="checkbox"/> No
D.4	Is the merchandise being designed and/or manufactured or produced by the Applicant? If Yes, do the licensees provide warranties and indemnities that their contributions to the design, marketing, manufacturing and production of the merchandise and packaging will not infringe upon the rights of others?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No

E. ACQUISITION AND DEVELOPMENT

E.1	Estimated number and types of productions to be acquired or developed during the next twelve (12) months:		
	Production Type	# Acquired / Developed	Production Type
	Documentaries:		Short Subjects:
	Features for Television Release:		Television Pilots / Specials:
	Features for Theatrical Release:		Television Series:
	Industrial / Training / Short Films:		Video / Computer Games:
	Mini Series / Docu-Dramas:		Webisodes / Mobisodes:
	Reality Television Series:		Other, please describe:

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F. DISTRIBUTOR / FILM LIBRARY INFORMATION

F.1	Describe in detail the planned distribution and exhibition of productions to be insured:		
F.2	Estimated number of productions to be distributed annually for each genre below:		
	Production Type	# Distributed	Production Type
	Documentaries		Short Subjects:
	Features for Television Release:		Television Pilots / Specials:
	Features for Theatrical Release:		Television Series:
	Industrial / Training / Short Films:		Video / Computer Games:
	Mini Series / Docu-Dramas:		Webisodes / Mobisodes:
	Reality Television Series:		Other, please describe:
F.3	Number of titles presently being distributed:		
F.4	Average number of additional titles to be acquired each year:		
F.5	Have all titles been previously exhibited?		<input type="checkbox"/> Yes <input type="checkbox"/> No
F.6	Have all necessary rights been obtained from third parties in order to distribute, exhibit or otherwise use all productions?		<input type="checkbox"/> Yes <input type="checkbox"/> No
F.7	Does Applicant obtain full indemnities from sellers or licensors against liability arising out of distribution, exhibition or other use of the productions?		<input type="checkbox"/> Yes <input type="checkbox"/> No
F.8	Does Applicant require seller or licensors to maintain current and continuous in-force Producers Errors and Omissions liability insurance or similar insurance on each production acquired for distribution, exhibition or other use?		<input type="checkbox"/> Yes <input type="checkbox"/> No
F.9	Does Applicant finance or otherwise participate in production of films distributed?		<input type="checkbox"/> Yes <input type="checkbox"/> No

G. REALITY TELEVISION

G.1	Who is financing the production?		
G.2	Who is distributing the production?		
G.3	If a major network or studio is financing and/or distributing, are they providing any of the following services to the Applicant?		
	(a) Risk management:		<input type="checkbox"/> Yes <input type="checkbox"/> No
	(b) Loss control:		<input type="checkbox"/> Yes <input type="checkbox"/> No
	(c) Clearance counsel:		<input type="checkbox"/> Yes <input type="checkbox"/> No
	(d) Creative control over content:		<input type="checkbox"/> Yes <input type="checkbox"/> No
G.4	Please describe how and where the concept / format was developed and how the Applicant participated in the development of the concept / format:		
G.5	Please provide a description of protocol / procedures that are in place for format / concept submissions to the Applicant:		
G.6	Do any other entities have controlling interest, including financial or creative control, other than the Applicant?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, please explain:		
G.7	Are contestants / participants required to sign a release?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, are the contestants / participants informed of the show's concept / format prior to signing their release?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If No, please explain:		
G.8	If participants do not sign a release, will footage that includes that participant be used?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If yes, please advise procedures used for the footage:		
G.9	Are the contestants / participants subject to background and psychiatric evaluations?		<input type="checkbox"/> Yes <input type="checkbox"/> No
G.10	Have all contestants/participants signed releases / consents in advance of the filming?		<input type="checkbox"/> Yes <input type="checkbox"/> No
G.11	Will hidden cameras be used?		<input type="checkbox"/> Yes <input type="checkbox"/> No
G.12	Will there be use of a lie detector device?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, please advise in what manner it will be used:		
G.13	Will there be any types of pranks, hoaxes or practical jokes in the show's format / concept?		<input type="checkbox"/> Yes <input type="checkbox"/> No
	If Yes, please provide a detailed description of examples that typify the types of pranks, hoaxes or practical jokes the Applicant intends to incorporate in the production:		

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Signature of authorized representative of Applicant

Title

Type / Print name of authorized representative

Date

Iowa Licensed Insurance Agent Signature

Agency Name / Agency Code

Type / Print Iowa Licensed Insurance Agent Name

Iowa Insurance Agent License Number