



Taylor & Taylor Associates, Inc.
Taylor & Taylor, Ltd.
www.taylorinsurance.com

D.I.C.E. PRODUCER APPLICATION

1. Name of Production Company (Applicant): _____

2. Mailing Address: _____

3. Premises Address: _____

4. Telephone: _____ Fax: _____ Email: _____
5. Applicant is: _____ Individual, _____ Partnership, _____ Corporation, _____ Other _____
6. Owner's Name & Title: _____ Audit Contact: _____
Insurance Coordinator: _____ Accountant: _____
7. Applicant's Experience in the business: _____
8. Type of Productions & Percentage of Activity:
Commercials _____% Music Videos _____% Industrials _____% Documentaries _____%
Educationals _____% 2nd Unit Filming _____% Travel Logs _____% CD-ROM _____%
Computer Effects _____% Exercise Videos _____% Animation _____% Infomercials _____%
Other _____%:
9. Describe Documentaries/Infomercials in detail: _____

10. Name three of your major advertising clients or last three advertising clients: _____

11. Estimated number of productions to be produced annually: _____
12. Estimate Annual Production Costs: \$ _____

13. Maximum cost any one production: \$ _____
14. Average cost any one production: \$ _____
15. Maximum length of time any one production from start of photography to date of protection print:

16. Average estimated length of time from start of photography to date of protection print for all productions to be insured: _____
17. Do you distribute any productions? If yes, please provide annual receipts: _____
18. Are you involved in any student films? ___ Yes ___ No If yes, what is the maximum budget size?

19. Do you co-produce any projects? ___ Yes ___ No If yes, what is the percentage of projects that are co-produced? ____% With whom do you co-produce? _____
Attach co production agreement(s).
20. Do you finance any projects? ___ Yes ___ No If yes, with whom and on what basis? _____

21. Percentage of productions to be produced outside of the U.S. and Canada: _____%
List countries: _____
22. Percentage of Location Filming: _____ % Percentage of Studio Filming _____ %
23. Percentage of Productions on: Film: 35mm _____ % 16mm _____ % 60mm _____ %
70mm _____ % Video _____ % Disc _____ % CD-ROM/DVD _____ % 3D _____ %
24. Will you be using any specialized computer programs to create any images or effects? _____
If so, please explain and give the name of the software and provide values: _____

- Name and address of the Lab/Studio performing the effects: _____
- Name and address of the processing/post laboratory: _____
25. Do you rent property to others: Yes _____ No _____. If yes, please provide annual receipts and a copy of your rental contract. _____
26. Do you perform or set up multimedia events? If yes, please attach a description of those activities.
27. Do you own any Property? Yes _____ No _____. If yes, provide the total value \$ _____

28. Please give a brief description of protection of Property (fire fighting equipment, alarms, security guards, etc.): _____
29. Provide the name and phone number of your payroll service: _____
30. Estimated annual Vehicle Cost of Hire: \$ _____
31. Do you require a certificate of insurance from independent contractors, and what are your requirements? _____
32. Has any form of insurance ever been cancelled or declined? Yes _____ No _____. If yes, please explain: _____
33. Previous insurer and policy number: _____
34. Previous Loss Experience for the past three years: _____
- _____
- _____

Stunts, Hazards & Special Effects:

You must notify us immediately with regards to any of the following. Information required includes:

1. Description of scene and story board.
2. Details of where and how the scene will be performed.
3. Details of all safety features utilized to protect people and property.
4. Names and telephone numbers of stunt or effects coordinators.

- | | | |
|--|--|--|
| <input type="checkbox"/> Use of watercraft | <input type="checkbox"/> Under water filming | <input type="checkbox"/> Filming near / on water |
| <input type="checkbox"/> Use of aircraft/helicopter/balloons | <input type="checkbox"/> Use of trains or railroad | <input type="checkbox"/> Underground filming |
| <input type="checkbox"/> Use of animals | <input type="checkbox"/> Use of pyrotechnics | <input type="checkbox"/> High value antiques / autos |
| <input type="checkbox"/> Auto race / chase scenes | <input type="checkbox"/> Auto crash scene | <input type="checkbox"/> Other dangerous auto scene |
| <input type="checkbox"/> Filming above 50' | <input type="checkbox"/> Stunts, Falls | |

Additional Comments: _____

COVERAGE

LIMIT

DEDUCTIBLE

Negative Coverage \$ _____ \$ _____

Faulty Stock, Camera & Processing \$ _____ \$ _____

Extra Expense \$ _____ \$ _____

Props, Sets & Wardrobe \$ _____ \$ _____

Miscellaneous Rented Equipment \$ _____ \$ _____

Miscellaneous Owned Equipment \$ _____ \$ _____

Third Party Property Damage \$ _____ \$ _____

Office Contents \$ _____ \$ _____

Computer Equipment \$ _____ \$ _____

Money & Securities \$ _____ \$ _____

Hired Vehicle Physical Damage Included in rented equipment limit

Other Desired Coverage: _____

Desired Effective Date: _____ Expiration Date: _____

Signing this application does not bind the applicant to purchase the insurance, but 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 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.

Date _____

Applicant Signature: _____

Name : _____

Position: _____