



REEL MEDIA  
CANADA

**D.I.C.E. Producer Application**  
**(Documentaries, Industrial, Commercials, Educational Films)**

Production Entity: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Applicant is:     Corporation    Partnership or    Individual

President                                  \_\_\_\_\_                                  Vice President                                  \_\_\_\_\_

Secretary                                  \_\_\_\_\_                                  Treasurer                                  \_\_\_\_\_

Experience of Applicant (provide examples and copy of resume/bio)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Financing source \_\_\_\_\_

Release or Distribution organization \_\_\_\_\_

Loss, if any, to be payable to \_\_\_\_\_

Productions are on:     Film                                   Digital                                   Tape                                   All  
                                \_\_\_\_\_ %Film                                  \_\_\_\_\_ %Digital                                  \_\_\_\_\_ %Tape                                  \_\_\_\_\_

Production personnel are:     Union Members                                   Non-Union Members

Name and location of:

a) Studios to be used: \_\_\_\_\_

b) Laboratory to be used: \_\_\_\_\_

c) Vaults to be used: \_\_\_\_\_

d) Cutting rooms to be used: \_\_\_\_\_

Estimated number of productions to be produced annually: \_\_\_\_\_

Average Cost Per Production: \_\_\_\_\_

Maximum Cost Per Production: \_\_\_\_\_

Estimated number of production costs:

Tape \$ \_\_\_\_\_                                  Film \$ \_\_\_\_\_                                  Total \$ \_\_\_\_\_



Type of Productions & Percentage of Activity

Music Video		%	2 <sup>nd</sup> Unit Filming		%	Industrial		%
Commercials		%	Travel Logs		%	CD-Rom		%
Computer Effects		%	Exercise Videos		%	Animation		%
Infomercials		%	Still Shots		%	Other		%

Other Documentaries/Infomercials, please describe in detail: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Stunts/Hazardous Activities: Will any of the productions involve the following:

Stunts    Railroads    Watercraft    Aircraft    Underwater Filming    Animals    Pyrotechnics

Other, please describe (use separate sheet if necessary) \_\_\_\_\_  
 \_\_\_\_\_

**Note: all the above and similar activities require additional information and underwriting approval)**

Percentage of productions to be filmed outside of the U.S. or Canada \_\_\_\_\_

Which countries \_\_\_\_\_

Number of times per year \_\_\_\_\_ Average days per production \_\_\_\_\_

Maximum cost any one Production \_\_\_\_\_

Maximum length of time from start of photography to date of protection print \_\_\_\_\_

Average estimated length of time from start of photography to date of protections to be insured  
 \_\_\_\_\_  
 \_\_\_\_\_

Maximum loss exposure: \$ \_\_\_\_\_ Any one occurrence  
*(total amount of negative film without protection prints at any one time stored at one location)*

Description and values at risk:

	<b>Owned</b>	<b>Rented</b> (Highest any one time)	<b>Totals</b>
Miscellaneous Equipment	\$ _____	\$ _____	\$ _____

Please provide a breakdown of the owned Equipment: Fixed \_\_\_\_\_ Mobile \_\_\_\_\_

Negative to be transported to processing lab:

Via \_\_\_\_\_ Frequency \_\_\_\_\_



Please provide details on protection and security of equipment/property while in use (on location/during transport) and while stored/not in use.

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Please provide the following location details of your premises:

Building:  Fire Resistive  Non-Combustible  Brick Joist  
 Other, please describe \_\_\_\_\_

Fire Protection:

Hydrant within 300m  Fire Department within 8km  Fire Alarm (local)  
 Fire Alarm (Central)  Full Sprinkler Protection  Partial Sprinkler Protection  
 Connected to 24hr Monitoring Station

Security:  Deadbolt  Alarm  Yes  No

If yes, is it Centrally Monitored  Yes  No

Other Protection (security guards, controlled building access etc.)? Please describe

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Do you rent property to others?  Yes  No

If yes, what are the annual receipts. \_\_\_\_\_

Please provide a copy of your rental contract.

Is any post-production work done for others?  Yes  No

If yes, what are the annual receipts. \_\_\_\_\_

Please attach a copy for the contract you use.

Has any form of insurance, in you or your company's name been cancelled or declined?  Yes  No

If yes, please explain. \_\_\_\_\_

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Previous Insurer \_\_\_\_\_ Policy No. \_\_\_\_\_



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Describe any losses/claims in the past five years \_\_\_\_\_

Coverages Desired

COVERAGE	LIMITS	DEDUCTIBLE
Negative Film	\$	\$
Faulty Stock / Camera Processing	\$	\$
Props/Sets/Wardrobe	\$	\$
Extra Expense	\$	\$
Miscellaneous Equipment	\$	\$
Third Party Property Damage	\$	\$
Office Contents	\$	\$
Money and Securities	\$	\$
Auto Physical Damage	\$	\$

Desired Effective Date of Policy \_\_\_\_\_ Term \_\_\_\_\_

**Signing this application does not bind the Applicant or the Company to complete the insurance, but is understood and agreed that the information contained herein shall be the bases of the contract should the 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.**

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

Date \_\_\_\_\_ Applicant \_\_\_\_\_

By \_\_\_\_\_

Title \_\_\_\_\_

Agent/ Broker \_\_\_\_\_

Address \_\_\_\_\_

Contact \_\_\_\_\_

Phone Number \_\_\_\_\_