

D.I.C.E. PRODUCERS PACKAGE APPLICATION FORM

PART 1 - APPLICANT INFORMATION:

1. Name of Production Company (Applicant):

2. Street Address:

City:

Province:

Postal Code:

3. Email Address:

Telephone Number:

Accounting Contact Name:

Accounting Email :

4. Accept delivery of insurance documents electronically at the above noted email address. Yes No

5. Applicant is: Individual Partnership Corporation, the Officers of which are:

President:

Vice President:

6. Experience of Applicant or attach CV:

7. Years in this business:

8. a) Previous Insurer:

b) Has the Applicant ever had any Insurance cancelled or declined in the last five years? Yes No

If "Yes", explain:

c) Describe any Previous Losses (insured or uninsured) sustained by the Producer in the last five (5) years:

9. a) What is the construction of the building you occupy?

Fire Resistive

Masonry

Frame

Other please describe:

b) Is your office protected by a monitored theft alarm? Yes No

c) Is your office protected by a deadbolt lock? Yes No

d) Is your office protected by a monitored fire alarm? Yes No

e) Is your office protected from fire by a sprinkler system? Yes No

f) Is there a fire hydrant within 300m of the building that your office is located in? Yes No

g) Is there a fire department within 8km of the building that your office is located in? Yes No

10. Productions are on: Film Tape or Digital Both

11. Production Personnel are: Union Members Non-Union Members

12. Estimate number of productions to be produced annually:

13. a) Estimate aggregate gross annual production costs for all productions:

Tape or Digital: \$ Film: \$ Total: \$

b) Actual Gross Production Costs for previous term (if applicable, if a renewal): \$

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

If Yes, estimated annual receipts for post-production work: \$

15. Types of films to be produced:

	Commercials	Documentaries	Educational Films
	Training Films	Music Videos	Animated Films
	Online Content	Other (Please Describe):	

16. Maximum cost any one production: \$

17. Maximum loss exposure in dollars any one occurrence: \$

(total amount of negative film/videotape/digital media without protection copies at any one time stored at one location)

18. Maximum length of time of any one production from start of photography to date of protection copy:

19. Average estimated length of time from start of photography to date of protection copy of all productions to be insured:

20. Are projects scheduled or anticipated to be produced outside of Canada or USA? Yes No

If Yes, please explain:

Foreign Filming – There is no coverage for foreign filming unless agreed in advance. If you plan on filming outside of Canada or USA, please contact us well in advance of departure and provide full details of filming including: production schedule, foreign budget, value of gear in transit, protection of the shot footage and gear. We will then be able to review coverage, contact insurers and negotiate any necessary alterations to your policy. An additional premium and/or higher deductible(s) and/or coverage sub-limit(s) may be applied.

PART 2 - COVERAGE DESIRED:

21. NEGATIVE/VIDEOTAPE/DIGITAL MEDIA

- a) Laboratories to be used:
- b) Editing or cutting rooms to be used:
- c) Any special film processes, special effects, or equipment (e.g. 3D, VR, Cinerama, Barco, Large Format Cameras, etc.):

Limit of Liability: \$

22. FAULTY STOCK, CAMERA AND PROCESSING

Policy contains warranty that cameras, lenses and related equipment must be fully tested in accordance with industry standards by the insured and proved to be sound at the commencement of filming/taping of any declared production.

Limit of Liability: \$

23. PROPS, SETS AND WARDROBE

Full 100% Value of Owned (attach schedule): \$

Rented (maximum value at any one time): \$

24. MISCELLANEOUS EQUIPMENT

a) Property used underwater, in the air or for stunts: Yes No

If Yes, please explain:

b) Does applicant rent or loan equipment to others? Yes No

If Yes, please explain:

Rental receipts on equipment rented with insurance: \$

Rental receipts on equipment rented without insurance: \$

c) Does applicant want Loss of Rental Income coverage? Yes No

d) Requested Limits of Coverage:

Owned Mobile Equipment: \$

Owned Fixed Equipment: \$

Rented Equipment: \$

25. THIRD PARTY PROPERTY DAMAGE

Brief description of property (other than miscellaneous equipment, props, sets, etc.) or facilities generally to be used in connection with the productions for which the Applicant may be responsible:

Limit of Liability: \$

26. EXTRA EXPENSE *(as a result of loss or damage to property/facilities used in connection with Insured Production)*

a) Estimate time needed to reconstruct destroyed sets or scenery:

b) Estimate time needed to replace lost or destroyed equipment:

Limit of Liability: \$

Are any of the following coverage extensions required:

	Yes	No	If so, Limit: \$
Civil Authority			
Non-Entertainment Industry Guild Union Strike			
Disruption of Outside Power			
Mechanical Breakdown of camera equipment			
Seizure and Quarantine coverage			
Mechanical Breakdown of any other property			

If Yes, what Property:

27. OFFICE CONTENTS/TENANTS IMPROVEMENTS

Limit of Liability: \$

28. PHYSICAL DAMAGE TO RENTED VEHICLES

Note: vehicles are valued based on the Actual Cash Value (depreciated value) at time of loss.

Per Occurrence Limit: \$

Aggregate Limit: \$

Maximum Value Any One Vehicle: \$

29. MONEY & SECURITIES

Limit of Liability: \$

30. ANIMAL MORTALITY

Limit of Liability: \$

31. COMMERCIAL GENERAL LIABILITY

a) Quote the following limits:

\$1,000,000

\$2,000,000

\$5,000,000

\$10,000,000

Other: \$

b) Tenant's Legal Liability Limit equivalent to the Commercial General Liability coverage? Yes No

Other limit: \$

c) Is International Indemnity Extension required? Yes No

If Yes, specify limit: \$

d) Are you now or will you be signatory to any guild, union or other contracts or agreements that require you to indemnify a third party?: Yes No

If Yes, provide details:

32. MULTIMEDIA LIABILITY / PRODUCERS ERRORS & OMISSIONS

a) Desired limits of Liability:

\$ Any One Claim

\$ Aggregate

\$ Deductible

b) Is coverage required for companion web-site? Yes No

c) Is coverage required for merchandising or companion materials? Yes No

d) Is coverage required for bodily injury or property damage arising out of the dissemination of information? Yes No

33. OPTIONAL COVERAGE CHECKLIST

Please quote the following coverages:

CLICK HERE FOR NO TO ALL THE FOLLOWING COVERAGES

Owned or Non-Owned Aircraft Hull & Liability	Yes	No
Owned or Non-Owned Watercraft Hull & Liability	Yes	No
Marine Charterer's Legal Liability	Yes	No
Marine Hull & Machinery/Protection & Indemnity	Yes	No
Political Risk / War Risk Insurance / Civil Commotion / Riot Insurance	Yes	No
Terrorism	Yes	No
US Workers' Compensation / Employers Liability	Yes	No
International Voluntary Workers' Compensation / Employers Liability	Yes	No
International Difference In Conditions / Excess Auto Liability	Yes	No
Automobile Liability Insurance	Yes	No
Life / Disability Insurance	Yes	No
Living Quarters for Cast or Crew	Yes	No
Medical Insurance	Yes	No
Accidental Death & Dismemberment Insurance	Yes	No
Weather Insurance	Yes	No
Railroad Protective Liability	Yes	No
Directors & Officers Liability	Yes	No
Pollution / Environmental Liability	Yes	No
Guild / Union Accident Insurance	Yes	No
Boiler & Machinery Breakdown	Yes	No
Employee Benefits Liability	Yes	No
Fiduciary Liability	Yes	No
Professional Liability	Yes	No
Employment Practices Liability	Yes	No
Employee Fidelity	Yes	No
Cyber Liability / Extortion / Network Security	Yes	No
Computer Theft/Funds Transfer	Yes	No

Film and Videotape Library	Yes	No
Reputational Injury/Death or Disgrace	Yes	No
Kidnap & Ransom	Yes	No
Cancellation of Event/Non-Appearance Insurance	Yes	No
Admitted Foreign Liability Outside Canada	Yes	No
UK Third Party & Employers Liability	Yes	No
Marine Cargo Insurance	Yes	No
Workplace Violence	Yes	No
Other (describe):		

Signing this application does not bind the applicant or Underwriters to complete the insurance, but it is understood and 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. Any material change to the Company's exposure must be reported prior to coverage applying.

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

Date:

Applicant:

Signature of Authorized Representative:

Name:

Title:

IMPORTANT

- 1. This policy does NOT cover the Assured for costs for talent, services or facilities provided by others and not budgeted and paid for by the Assured, unless specifically declared and endorsed onto the policy.**
- 2. The Negative Film/Videotape/Digital Media Coverage Form contains an important representation in connection with artwork and drawings for animated productions; a representation that cameras, lenses and related equipment are to be fully tested; as well as a coverage limitation as respects accumulated unprocessed negative film in excess of 5 shooting days.**