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## **MISSOURI GENERAL APPLICATION MEDIA PERILS INSURANCE**

**This General Application must be completed by all Applicants. Each Applicant must also complete supplemental Schedule(s) for each class of business for which coverage is requested.**

**NOTICE: THE POLICY FOR WHICH THIS APPLICATION IS SUBMITTED IS WRITTEN ON A CLAIMS MADE AND REPORTED BASIS AND COVERS ONLY CLAIMS FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD OR EXTENDED REPORTING PERIOD, IF APPLICABLE, AND REPORTED IN WRITING TO THE INSURER PURSUANT TO THE TERMS THEREIN. THE LIMIT OF LIABILITY AVAILABLE TO PAY DAMAGES OR SETTLEMENT AMOUNTS SHALL BE REDUCED AND MAY BE TOTALLY EXHAUSTED BY PAYMENT OF DEFENSE COSTS. PLEASE READ THIS APPLICATION AND THE POLICY CAREFULLY.**

Please answer all questions and submit the requested information. If you do not have a copy of the Policy, please request it from your agent, broker or legal representative.

### INFORMATION ABOUT THE APPLICANT

1. Name of Applicant: \_\_\_\_\_

2. Street & Mailing Address: \_\_\_\_\_

Website: \_\_\_\_\_

3. Applicant is a:  Corporation  LLC  Individual  Partnership  Other (Explain): \_\_\_\_\_

\_\_\_\_\_

4. How long has the Applicant been in business? \_\_\_\_\_ Under current management? \_\_\_\_\_

5. Names and titles of Principals, Officers, Partners, or Individuals: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. If Coverage is desired for more than the Applicant, please answer Questions 1 to 5 above for each entity to be named, the relationship of each to the Applicant, and the percentage of ownership, if any, by the Applicant. Attach a separate sheet if necessary:

\_\_\_\_\_

\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

7. If Coverage is desired for Additional Insureds, please list the name of each, the type of entity (per Question 3. above), and the relationship or services provided to the Applicant: \_\_\_\_\_

8. Desired Effective Date: \_\_\_\_\_ Expiration Date \_\_\_\_\_ Pending and Prior Date: \_\_\_\_\_

9. Limit of Liability Per Wrongful Act: \$ \_\_\_\_\_  
In the aggregate: \$ \_\_\_\_\_  
Deductible amount: \$ \_\_\_\_\_

10. Please describe Declared Production Activity:  
Include details relating to your business activity in the entertainment industry; or a specific project or subject matter that you are applying for coverage.

[Note: The scope of insurance coverage may depend upon the description. Please be as accurate, complete and exact as possible.]

11. Is Applicant engaged in any business or profession other than described above?  Yes  No  
If "yes", please explain \_\_\_\_\_

12. Please attach a brief biography or resume of the Applicant and/or its principals, owners, members and/or management.

13. Prior Insurance:  
Please provide below full particulars of all insurance similar to the type requested carried in the past five (5) years:

Insurance Carrier	Policy Period	Limits of Liability	Deductible	Premium
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

14. If Applicant does not currently have insurance of the type applied for herein, please explain why not and why this coverage is being requested now:

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

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**INFORMATION ABOUT CLEARANCE**

15. Name, address, email address, website and phone number of the Attorney who clears literary, musical and other materials:

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16. State briefly the type and length of experience of the Attorney: \_\_\_\_\_

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17. State briefly the Clearance Procedures (or attach a copy of them): \_\_\_\_\_

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18. What is the policy and procedure with regard to the submission of unsolicited materials?

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If Submission Agreements are used, please attach a sample.

19. Has the Attorney approved as adequate the steps taken to clear all necessary rights?

Yes    No

If "no", please explain \_\_\_\_\_

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**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

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20. Has Applicant or any of its agents been unable to obtain or been refused an agreement or release after having:

- (a) Negotiated for any rights in literary, musical or other materials, or-
- (b) Negotiated for releases from any persons with the production?

Yes  No. If "yes", please explain: \_\_\_\_\_

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**INFORMATION ABOUT PRIOR EXISTING AND POTENTIAL CLAIMS**

21. Applicant represents that neither his/her/its counsel, its partners, officers directors, senior employees nor any person(s) or entity(ies) proposed for this Insurance have any knowledge, actual or constructive:

(a) Of any Suits or Claims or legal proceedings made or commenced against the Applicant, or any of its officers, directors, agents or affiliated corporations within the past five (5) years for defamation, invasion of privacy, plagiarism, piracy, infringement of copyright (statutory or common law), unauthorized use of titles, formats, characters, plots, ideas or other material, breach or implied contract out of the alleged submission of any literary, musical or other material, or unfair competition.

NO EXCEPTIONS. Please Initial \_\_\_\_

EXCEPT AS FOLLOWS: Please describe in detail, and attach addendum if necessary. This information should include the following: number of judgments rendered, amount of each judgment, number of settlements before trial, amount of each settlement and a brief description of the substance of the claim.

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(b) Of any existing or threatened Claim or legal proceedings of any kind based upon any work(s) to be insured or any material contained in or upon such work(s) is based, that would be covered by the policy requested by this Application.

NO EXCEPTIONS. Please Initial \_\_\_\_

EXCEPT AS FOLLOWS: \_\_\_\_\_

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(c) Of any fact, inquiry, circumstance, situation, act, error, omission or prior negotiation which might reasonably lead to a Claim, Suit or legal proceeding instituted against the Applicant or any person(s) or entity(ies) proposed for this insurance that would be covered by the Policy requested by this Application.

NO EXCEPTIONS. Please Initial \_\_\_\_

EXCEPT AS FOLLOWS \_\_\_\_\_

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**THIS APPLICATION IS SUBMITTED WITH THE FOLLOWING SPECIFIC UNDERSTANDING  
PLEASE CAREFULLY READ AND INITIAL EACH ITEM**

24.

- (a) Applicant represents that the answers and statements above and those contained on any Schedules attached hereto are in all respects true and material to the issuance of an insurance policy and that Applicant has not omitted, suppressed or misstated any facts.

PLEASE INITIAL \_\_\_\_

- (b) Applicant and his/her/its counsel have supplied Company with all information required to be furnished pursuant to the Clearance Procedures, and to the extent such information is not known at the time of the Application, such information will be furnished in writing to Company as soon as known. Company thereafter shall have the right to limit the insurance coverage at its discretion.

PLEASE INITIAL \_\_\_\_

- (c) If any Claims, threatened Claims, or other matters which might affect issuance of a policy come to the attention of Applicant after execution or filing of this Application with the Company but before a policy is issued, Applicant must notify the Company immediately. Whether notified or not, Company shall have the right to limit the insurance coverage at its discretion.

PLEASE INITIAL \_\_\_\_

- (d) Applicant agrees to obtain from third parties from whom it obtains any matter, material or services for the insured work written warranties and indemnities against Claims arising out of the use of such matter, material or services.

PLEASE INITIAL \_\_\_\_

- (e) Applicant and its counsel agrees that it will use due diligence to determine whether any portrayal, matter or materials to be used in the work(s) to be insured violates the right of any person or entity or are protected by law and, where necessary, to obtain from parties owning rights therein, the right to use the same in connection with the insured work(s).

PLEASE INITIAL \_\_\_\_

- (f) All Exclusions in the Policy apply regardless of any answers or statements in this Application and any Schedules attached hereto.

PLEASE INITIAL \_\_\_\_

- (g) Applicant understands that the Limit of Liability, Deductible, Policy Term and other terms and conditions under any Policy to be issued in response hereto shall include both Loss payment and Defense Costs as defined in the Policy and may be different than those requested. Applicant agrees to such differences.

PLEASE INITIAL \_\_\_\_

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- (h) Applicant understands that the Defense Costs provision of the Policy stipulates that the Limits of Liability may be completely exhausted by the cost of legal defense and any Deductible or retention shall apply to investigation expenses and Defense Costs as well as indemnity.

PLEASE INITIAL \_\_\_\_

- (i) Applicant acknowledges that Claims and Suits may be brought which may combine covered and uncovered claims or forms of relief and that conflicts of interest may arise as between one Applicant and another Applicant under this Policy or as against the Company. In all such circumstances, Applicant recognizes that, under this policy, the Insurer's obligation is only to provide one (1) counsel for defense of all Claims and all Insureds. If any further counsel are desired by Applicant, they may be retained at the Applicant's own cost and expense in accordance with the terms of this Policy, but the Company's counsel will conduct and control the defense. Applicant understands that the premiums set forth herein, the Deductible and the balance of the terms of this Policy have been specifically set and determined with the foregoing provisions in mind and acknowledges that the Applicant is waiving any right to separate counsel paid for by the Company but shall retain the right to such counsel paid by the Applicant.

PLEASE INITIAL \_\_\_\_

## WARRANTIES

**The Applicant acknowledges that the Policy has the following warranties in the Policy:**

***Failure to fulfill these warranties will release us from all obligations under this Policy to the extent that a Loss is suffered or increased by that failure as to all Insureds.***

All Insureds hereby warrant that:

1. In connection with Declared Production Activity insured by this Policy, the Insured has and will adopt and adhere to Clearance Procedures that are designed to prevent and protect against the types of Claims covered by this policy, including but not limited to, the Clearance Procedures attached to the Application. The Insured will furnish, at our request, copies of their Clearance Procedures and their efforts to follow them.
2. The Insured will obtain from third parties that provide the Insured with any matter, material or services for a Declared Production Activity, written warranties and indemnification agreements against Claims arising out of the use of such matter, material or services.
3. The Insured will use due diligence to determine whether any portrayal, matter or materials to be used by the Insured violates the rights of any person or organization or is protected by law and, when necessary, the Insured will obtain the rights to use such portrayal, matter or materials.
4. The Insured will take all steps to:
  - (a) Assure the originality and ownership of literary and musical materials;
  - (b) Obtain contracts and releases from persons appearing in or contributing material to you; and
  - (c) Avoid using any libelous material or material constituting a violation of any right of privacy or publicity.
5. The Insured will obtain the proper clearance for all of the following prior to the Distribution of a Declared Production Activity:
  - (a) The use or release of Titles.
  - (b) The use or release of music in any Declared Production Activity.
  - (c) The creation, use, release, or Distribution of music other than music in the exact format embodied in a Declared Production Activity.

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- (d) The creation, use, release, or Distribution of any photographs in connection with any Declared Production Activity.
  - (e) The creation, use, release, or Distribution of any film clips or images.
  - (f) The intentional or unintentional use or release of any:
    - (1) Name, voice, likeness or image of an individual, living or dead;
    - (2) Characteristic, personal quality or other information that identifies an individual, living or dead;
    - (3) Business name, corporate name or product name;
    - (4) Registered or common law trademark, or trade dress; or
    - (5) Actual or fictional phone number, street address or location.
6. You will use attorneys to supervise and approve acquisition of underlying rights and compliance with the Clearance Procedures.

PLEASE INITIAL \_\_\_\_

## **CLEARANCE PROCEDURES**

Applicant's attorney must assure him/herself of the following before first exhibition of the insured work(s):

1. A copyright report must be obtained, covering domestic and foreign copyright, as well as all extensions and renewals thereof, for all literary material (other than original and unpublished) contained in the work(s). If the Applicant is acquiring the work(s) as a completed work (such as a pick-up of a motion picture), a copyright report must also be obtained covering the completed work. In the case of an unpublished original work, the origin of the work must be traced in order to ascertain that the Applicant has all required rights in the work.
2. Written agreements must exist between the Applicant and the creators, authors, writers and owners of all material, including quotations from copyrighted works, used in the insured work(s), authorizing the Applicant to use the material in the insured work(s).
3. If the work(s) is in any way based on actual facts, it must be ascertained if the source material is primary (e.g. direct interview, court records) and not secondary (e.g. another copyrighted work). Use of secondary sources may be permissible, but full details must be provided to Company in an attachment to the Application.
4. Written releases must be obtained from all persons who are recognizable or who might reasonably claim to be identifiable in the insured work(s), or whose name, image or likeness is used, and if such person is a minor, the minor's consent must be legally binding. If the recognizable or identifiable person is deceased, releases must be obtained from the personal representative of such person. Releases of the type described in the preceding two sentences may not be required in certain instances, but full details must be provided to the Company in an attachment to the Application. Releases are not necessary if the recognizable person is part of a crowd or background shot and the image is not shown for more than a few seconds or given special emphasis.
5. Where the work is fictional in whole or in part, the names of all characters must be fictional. In certain limited instances, particular names need not be fictional, but full details must be provided to the Company in an attachment to the Application.

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6. Where scenes are filmed depicting or referring to distinctive businesses, personal property or products identifiable with any person, firm or corporation, or depicting or referring to distinctive real property of any person, firm or corporation, written releases must be obtained from such person, firm or corporation granting the Applicant the right to film and use such property in the insured work(s). In certain instances releases may not be required, but full details must be provided to the Company in an attachment to the Application. Releases are not necessary if property is non-distinctive background only.
7. All releases must give the Applicant the right to edit, modify, add to and/or delete any or all of the material supplied by the releaser. Releases from recognizable persons must grant the Applicant the right to fictionalize the Applicant's portrayal of the releaser.
8. All contracts and releases must give the Applicant the right to market the work(s) for use in all media and markets (e.g. video discs, cassettes, supplemental markets), except to the extent the Applicant qualifies the application to exclude insurance coverage for particular media.
9. Synchronization and performance licenses must be obtained from the composer or copyright owner of all music used in the insured work(s). Licenses are unnecessary if the music (and its arrangement) is in the public domain. Licenses must also be obtained for the use of previously recorded music.
10. If the work(s) contains any film clips, the Applicant must obtain authorization to use the film clip from the owner of the clip who has the right to grant such authorization and must obtain authority from the appropriate persons for "secondary use" of all material contained in the film clip, e.g. underlying literary and musical rights, performances of actors and musicians.
11. A report (generally known as a "title report") covering the title of the work(s) must be obtained from a recognized source setting forth prior uses of the same or similar titles, and the title of the work(s) must be changed to avoid any conflict.
12. It must be determined whether the Applicant, or any of its officers, directors, partners or agents received any submission of any similar material or work(s), and if so, the Company must be fully advised of all circumstances relating to each such occurrence, in an attachment to the Application.
13. It must be determined that the insured work(s) does not contain any material which constitutes defamation, invasion of privacy, violation of the right of publicity or of any other right of any person, firm or corporation.
14. Prior to any public exhibition of the work(s), it must be previewed to assure that the Clearance Procedures have been followed.
15. To the extent that any information required to be furnished pursuant to these Clearance Procedures is not known at the time of the application, such information must be furnished in writing to the Company as soon as known.

THE FOREGOING CLEARANCE PROCEDURES SHOULD NOT BE CONSTRUED AS EXHAUSTIVE; NOR DO THEY COVER ALL SITUATIONS WHICH MAY ARISE, GIVEN THE GREAT VARIETY OF WORKS. RATHER, APPLICANT AND ITS COUNSEL MUST CONTINUALLY MONITOR THE WORK(S) AT ALL STAGES, AND IN LIGHT OF ANY SPECIAL CIRCUMSTANCES, TO MAKE CERTAIN THAT THE WORK(S) CONTAINS NO MATERIAL WHICH COULD GIVE RISE TO A CLAIM.



## MEDIA PERILS LIABILITY INSURANCE APPLICATION

### PLEASE INDICATE DESIRED COVERAGE TERMS:

Each Applicant must complete the General Application. Please complete the attached supplemental Schedules for coverage consideration for each of the below classes of business for which coverage is requested.

### PLEASE CHECK THE DOCUMENTS SUBMITTED WITH THE GENERAL APPLICATION.

- GENERAL APPLICATION
- Schedule AD : ACQUISITION & DEVELOPMENT -  
[Acquisition and Development activities of a Film or Television Producer]
- Schedule C : COMMERCIALS, MUSIC VIDEOS, EDUCATIONAL OR INDUSTRIAL FILMS
- Schedule D : DISTRIBUTOR – [Film, Television, Video/DVD Music]
- Schedule I: INDIVIDUAL WORK –  
[Single Film, Television Special, Pilot or Series, Radio Program or Series, Computer Program, Electronic Work, Multimedia Work, Book, Stage Play]
- Schedule M : MERCHANDISE –
- Schedule MCLP: MUSIC- COMPOSER/LYRICIST AND/OR MUSIC PUBLISHER–
- Schedule PER : PERFORMER –[Live performer all types]
- Schedule ST : SOUND TRACK –
- Schedule W : WEBSITE CONTENT –

### Notice to Applicant: Please Read Carefully

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THE UNDERSIGNED AUTHORIZED REPRESENTATIVE OF THE APPLICANT DECLARES THAT THE STATEMENTS SET FORTH HEREIN ARE TRUE, AND REASONABLE EFFORT HAS BEEN MADE TO OBTAIN SUFFICIENT INFORMATION FROM ALL PERSONS PROPOSED FOR THIS INSURANCE TO FACILITATE THE ACCURATE COMPLETION OF THIS APPLICATION. THE UNDERSIGNED AUTHORIZED REPRESENTATIVE AGREES THAT IF THE INFORMATION SUPPLIED ON THIS APPLICATION CHANGES BETWEEN THE DATE OF THIS APPLICATION AND THE EFFECTIVE DATE OF THE INSURANCE, HE/SHE WILL, IN ORDER FOR THE INFORMATION TO BE ACCURATE ON THE EFFECTIVE DATE OF THE INSURANCE, IMMEDIATELY NOTIFY THE COMPANY OF SUCH CHANGES, AND THE COMPANY MAY WITHDRAW OR MODIFY ANY OUTSTANDING QUOTATIONS OR AGREEMENTS TO BIND THE INSURANCE.

SIGNING OF THIS APPLICATION DOES NOT BIND THE APPLICANT OR THE COMPANY TO COMPLETE THE INSURANCE, BUT IT IS AGREED THAT THIS APPLICATION AND ANY SUPPLEMENTAL SCHEDULES SHALL BE THE BASIS OF THE CONTRACT SHOULD A POLICY BE ISSUED, AND IT WILL BE DEEMED TO BE ATTACHED TO AND BECOME PART OF THE POLICY.

## MEDIA PERILS LIABILITY INSURANCE APPLICATION

ALL ATTACHMENTS AND MATERIALS SUBMITTED WITH THIS APPLICATION, INCLUDING ANY APPLICATIONS FOR UNDERLYING POLICY(IES) AS WELL AS FOR PRIOR POLICIES IN AN UNINTERRUPTED SERIES OF POLICIES ISSUED BY THE COMPANY OR THE INSURER(S) FOR PRIOR UNDERLYING POLICIES ARE HEREBY INCORPORATED BY REFERENCE INTO THIS APPLICATION AND MADE A PART HEREOF.

THE UNDERSIGNED AUTHORIZED REPRESENTATIVE OF THE APPLICANT HEREBY ACKNOWLEDGES THAT:

1. THIS POLICY APPLIES TO EVENT(S) WHICH TAKE PLACE DURING THE POLICY TERM AND WHICH TRIGGER COVERAGE UNDER THE INSURING AGREEMENTS OF THE POLICY, AS APPLICABLE.
2. THE LIMIT OF LIABILITY AVAILABLE TO PAY JUDGMENTS OR SETTLEMENTS WILL BE REDUCED, AND MAY BE COMPLETELY EXHAUSTED, BY THE PAYMENT OF DEFENSE COSTS, AND IN SUCH EVENT, THE COMPANY WILL NOT BE RESPONSIBLE FOR THE CONTINUED DEFENSE COSTS OR FOR THE AMOUNT OF ANY JUDGMENT OR SETTLEMENT TO THE EXTENT THAT ANY OF THE FOREGOING EXCEED THE APPLICABLE LIMIT OF LIABILITY.

**Notice to Arkansas applicants:** "Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

**Notice to Colorado applicants:** "It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of insurance within the department of regulatory agencies."

**Notice to District of Columbia applicants:** "WARNING: It is a crime to provide false or misleading information to an insurer for the purpose of defrauding the insurer or any other person. Penalties include imprisonment and/or fines. In addition, an insurer may deny insurance benefits if false information materially related to a claim was provided by the applicant."

**Notice to Florida applicants:** "Any person who knowingly and with intent to injure, defraud, or deceive any insurer files a statement of claim or an application containing any false, incomplete, or misleading information is guilty of a felony of the third degree."

**Notice to Hawaii applicants:** "For your protection, Hawaii law requires you to be informed that presenting a fraudulent claim for payment of a loss or benefit is a crime punishable by fines or imprisonment, or both."

**Notice to Kentucky applicants:** "Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance 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."

**Notice to Louisiana applicants:** "Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison."

**Notice to Maine applicants:** "It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties may include imprisonment, fines or a denial of insurance benefits."

**Notice to Minnesota applicants:** "A person who files a claim with intent to defraud or helps commit a fraud against an insurer is guilty of a crime."

**Notice to New Jersey applicants:** "Any person who includes any false or misleading information on an application for an insurance policy is subject to criminal and civil penalties."

**Notice to New Mexico applicants:** "ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO CIVIL FINES AND CRIMINAL PENALTIES."

**Notice to New York applicants:** "Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or 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, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation."

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

**Notice to Ohio applicants:** “Any person who, with intent to defraud or knowing that he is facilitating a fraud against an insurer, submits an application or files a claim containing a false or deceptive statement is guilty of insurance fraud.”

**Notice to Oklahoma applicants:** “WARNING: Any person who knowingly, and with intent to injure, defraud or deceive any insurer, makes any claim for the proceeds of an insurance policy containing any false, incomplete or misleading information is guilty of a felony.”

**Notice to Pennsylvania applicants:** “Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or 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 and subjects such person to criminal and civil penalties.”

**Notice to Tennessee applicants:** “It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.”

**Notice to Texas applicants:** “Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.”

**Notice to Virginia applicants:** “It is a crime to knowingly provide false, incomplete or misleading information to an insurance company for the purpose of defrauding the company. Penalties include imprisonment, fines and denial of insurance benefits.”

**Notice to West Virginia applicants:** “Any person who knowingly presents a false or fraudulent claim for payment of a loss or benefit or knowingly presents false information in an application for insurance is guilty of a crime and may be subject to fines and confinement in prison.”

THE UNDERSIGNED AUTHORIZED REPRESENTATIVE IS MAKING THE REPRESENTATIONS IN THIS APPLICATION ON BEHALF OF THE APPLICANT AND ALL ENTITIES OR PERSONS PROPOSED FOR COVERAGE UNDER THE POLICY.

\_\_\_\_\_ By Applicant  
\_\_\_\_\_ Title (President, CEO, or CFO)  
\_\_\_\_\_ Date

AS ATTORNEY FOR THE APPLICANT, I BELIEVE THE STATEMENTS CONTAINED IN THE APPLICATION AND ALL ATTACHED SCHEDULES ARE CORRECT. I AM FAMILIAR WITH THE COMPANY’S STANDARD CLEARANCE PROCEDURES, WHICH ARE ATTACHED TO THIS APPLICATION. I HAVE BEEN RETAINED BY THE APPLICANT TO, AND WILL USE MY BEST EFFORTS TO SEE THAT THOSE CLEARANCE PROCEDURES ARE FOLLOWED ON ALL WORKS CREATED OR PRODUCED BY THE APPLICANT OR WHERE THE APPLICANT CONTROLS CREATION OR PRODUCTION.

FOR ALL OTHER PRODUCTIONS AND OTHER WORKS THAT HAVE BEEN ACQUIRED FOR DISTRIBUTION BY THE APPLICANT, I WILL USE MY BEST EFFORTS TO SEE THAT THE FOLLOWING CONDITIONS ARE SATISFIED: (I) SUCH A PRODUCTION HAD BEEN PUBLICLY EXHIBITED OR BROADCAST PRIOR TO THE ACQUISITION BY THE APPLICANT; (II) THE DISTRIBUTION OF SUCH A PRODUCTION OR WORK WAS COVERED BY OTHER INSURANCE FROM THE DATE OF ITS FIRST PUBLIC EXHIBITION; (III) THE APPLICANT DOES NOT CANCEL SUCH OTHER INSURANCE; (IV) SUCH OTHER INSURANCE NAMES THE APPLICANT AS AN ADDITIONAL INSURED; AND (V) SATISFACTORY EVIDENCE OF SUCH OTHER INSURANCE IS PROVIDED TO AND APPROVED BY THE COMPANY:

Attorney’s Signature: \_\_\_\_\_ Date Signed: \_\_\_\_\_

## SCHEDULE AD – ACQUISITION AND DEVELOPMENT MEDIA PERILS INSURANCE

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**The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.**

Applicant's Name \_\_\_\_\_

1. State Applicant's actual and estimated total annual gross receipts from all sources:

Next Year \_\_\_\_\_

Current Year \_\_\_\_\_

First Previous Year (20\_\_\_\_) \_\_\_\_\_

Second Previous Year (20\_\_\_\_) \_\_\_\_\_

2. Estimate of the number and types of work(s) to be distributed annually:

- |  |  |
|--|--|
| a. Features for theatrical release _____     | g. Industrial & training films _____     |
| b. Features for television release _____     | h. Short subjects _____                  |
| c. Television pilot and specials _____       | i. Music: Videos, CDs, Audio Tapes _____ |
| d. Television series (No. of episodes) _____ | j. CD Rom/Computer/Video games _____     |
| e. Mini-Series and Docu-Dramas _____         | k. Other (Describe) _____                |
| f. Documentaries _____                       |  |

3. What is Applicant's policy and procedure with regard to submissions from unsolicited materials?  
\_\_\_\_\_

4. Does Applicant utilize outside writers, producers, musicians, etc?  Yes  No

If "yes", please explain and provide details as to Applicant's contractual protection: \_\_\_\_\_  
\_\_\_\_\_

5. LIBRARY WORK OWNED OR DISTRIBUTED BY APPLICANT - For each production for which Insurance is requested, please attach a Library List indicating the following information: Title, genre, actual events or persons portrayed, date first exploited, date acquired, any restrictions on Applicant's territory rights, details of any past or present insurance and details of any past or present claim made against the production.

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

## SCHEDULE C – COMMERCIALS, MUSIC VIDEOS, EDUCATIONAL OR INDUSTRIAL FILMS

### MEDIA PERILS INSURANCE

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The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.

Applicant's Name \_\_\_\_\_

1 State Applicant's actual and estimated total annual Gross Production Cost and gross receipts from all sources:

	Gross Production Cost	Gross Receipts
Next Year	_____	_____
Current Year	_____	_____
First Previous Year (20__)	_____	_____
Second Previous Year (20__)	_____	_____

2 Estimate of the number and types of productions to be produced annually:

- |                            |  |
|----------------------------|--|
| a. Commercials _____       | e. Trailers _____                        |
| b. Music Videos _____      | f. Trailers _____                        |
| c. Industrial films _____  | g. The Making of Behind the Scenes _____ |
| d. Educational films _____ | h. Other (Describe) _____                |

3 Please describe in detail Applicant's five largest productions during the previous two years:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4 Please list the Applicant's primary clients. \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

5 Please list the directors and producers Applicant works with most often. Please attach a brief resume of any director(s) or producer(s) Applicant utilizes on a frequent basis or for any directors who have exclusive agreements with Applicant.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

6. Does the Applicant sign or use any production agreements with clients or AICP or ABAA contracts?

Yes  No If "yes", please attach a copy.

7. Are these productions conceived, created and produced entirely by the Applicant?  Yes  No

a. If "no", please explain who generates the concepts, provides any material for, creates and/or produces these productions.

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b. If Applicant does receive concepts, ideas and other material from agencies, record labels or other clients, is Applicant indemnified for use of the provided material?

Yes  No

If "no" please explain: \_\_\_\_\_

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8. Does the Applicant ever produce treatments, story boards and/or speculative ("Spec") productions and release them to current or prospective clients (i.e., advertising agencies, record labels, etc)?

Yes  No

If "yes", please describe in detail the planned distribution and exhibition of these works, the clearance procedures for these works and instructions to client:

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9. In the process of producing commercials, is Applicant ever supplied with a "temp track" containing music from a commercially released recording or a composer that has not been licensed for the commercials?

Yes  No

If "yes", what are Applicant's policy, practice and procedure with regard to "temp tracks"?

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10. For all works produced by Applicant except music videos, where Applicant is responsible to supply music, please provide the following information about the music in these productions:

a. Is the music in these productions:

Composed and recorded by the Applicant (or employee)?  Yes  No

Provided by the client of Applicant for use in the production?  Yes  No

Created specifically for the production as a "work for hire"?  Yes  No

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

Licensed from an independent third party?  Yes  No

Other circumstance? (Explain) \_\_\_\_\_

b. Are the following musical rights in these productions cleared by Applicant?

Recording and synchronization?  Yes  No

Performing rights?  Yes  No

Right to distribute for all forms of distribution contemplated (home video, etc.)?  Yes  No

If the response to any of the above is "no", please explain: \_\_\_\_\_

\_\_\_\_\_

c. If original music is commissioned, is a "Hold Harmless" been obtained from the composer?

Yes  No

If "no", explain: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. For all works produced by Applicant, including music videos, where Applicant is responsible to clear the following rights, please provide the information requested:

a. Does the agency, record company, artist, director or any client supply materials (i.e. music, props, posters, photographs, music, etc) to be used in any production?

Yes  No

If "yes", please provide the circumstances and the materials supplied:

\_\_\_\_\_

\_\_\_\_\_

Is the Applicant indemnified for the use of that material by the individual or entity supplying the material?

Yes  No

If the answer to the last question is "no", please explain: \_\_\_\_\_

\_\_\_\_\_

b. Will any third party materials be used in these productions, including but not limited to film clips, photographs, artwork, literary material, trademarks, trade names, logos, merchandise and toys? This includes their use as props or set dressing whether prominently or incidentally displayed.

Yes  No

If "yes", will Applicant obtain the following licenses and consents?

From all copyright, trademark and trade name owners?  Yes  No

From writers and/or others?  Yes  No

From performers or persons appearing in the materials?  Yes  No

From music owners?  Yes  No

From the owners of any merchandise or toys?  Yes  No

From the owners of any prop or set dressing item?  Yes  No

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

If any of the answers above is "no", please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

12. Does Applicant own or will Applicant own any rights to the distribution of any productions produced by Applicant?

Yes  No

If "yes", will Applicant secure the music licenses and other consents necessary to properly exploit the distribution rights owned by Applicant?

Yes  No

If "no", explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

13. Does Applicant have a Library of productions to be covered under the insurance policy applied for?

Yes  No

If "yes", please provide as much of the following information as is applicable to each production: Title, genre, actual events or persons portrayed in the production, date of first public exploitation, date produced or acquired, restrictions on Applicant's territory rights, details of any past or present insurance on this production and details of any past or present claim made against this production (attach list or spread sheet if necessary)

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date



## SCHEDULE D - DISTRIBUTORS MEDIA PERILS INSURANCE

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**The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.**

Applicant's Name \_\_\_\_\_

1 State Applicant's actual and estimated total annual gross receipts from all sources:

Next Year \_\_\_\_\_  
Current Year \_\_\_\_\_  
First Previous Year (20\_\_\_\_) \_\_\_\_\_  
Second Previous Year (20\_\_\_\_) \_\_\_\_\_

2 Estimate of the number and types of work(s) to be distributed annually:

- |  |  |
|--|--|
| a. Features for theatrical release _____     | g. Industrial & training films _____     |
| b. Features for television release _____     | h. Short subjects _____                  |
| c. Television pilot and specials _____       | i. Music: Videos, CDs, Audio Tapes _____ |
| d. Television series (No. of episodes) _____ | j. CD Rom/Computer/Video games _____     |
| e. Mini-Series and Docu-Dramas _____         | k. Other (Describe) _____                |
| f. Documentaries _____                       |  |

3 What is the number of works currently owned or controlled by Applicant? \_\_\_\_\_

4 What is the average number of works acquired each year? \_\_\_\_\_

5 LIBRARY WORK OWNED OR DISTRIBUTED BY APPLICANT - For each production for which insurance is requested, please attach a Library List indicating the following information: Title, genre, actual events or persons portrayed, date first exploited, date acquired, any restrictions on Applicant's territory rights, details of any past or present insurance and details of any past or present claim made against the production.

6 Have all works distributed by Applicant been previously exhibited or released for sale to the public?

Yes  No

If "no", please list title and explain reason: \_\_\_\_\_

\_\_\_\_\_

7 Please provide Applicant's primary clients, territories and markets: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

8 Does Applicant obtain full indemnities from sellers or licensors against liability arising out of the distribution, exhibition or other use of the work(s) distributed?  Yes  No

If "yes" and Applicant has a standard contract, please attach a copy.

If "no", please explain \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

9 Does Applicant require seller or licensor to maintain current and continuous in-force Producer's Errors and Omissions Liability insurance on each work acquired for distribution?  Yes  No

If "no", explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

10 Please describe the due diligence process used by Applicant when purchasing or licensing a work for distribution to determine whether all necessary underlying rights in the work have been cleared.

\_\_\_\_\_  
\_\_\_\_\_

11 Does Applicant generally finance or otherwise participate in the production of works distributed?

Yes  No

If "yes", explain: \_\_\_\_\_  
\_\_\_\_\_

12 Have all necessary rights been acquired to distribute the work(s) in the medial and territory contemplated by Applicant (theatrical, television, pay-TV, videos, DVD's etc)?  Yes  No

If "no", explain: \_\_\_\_\_  
\_\_\_\_\_

FOR ALL OTHER PRODUCTIONS AND OTHER WORKS THAT HAVE BEEN ACQUIRED FOR DISTRIBUTION BY THE APPLICANT, I WILL USE MY BEST EFFORTS TO SEE THAT THE FOLLOWING CONDITIONS ARE SATISFIED: (I) SUCH A PRODUCTION HAD BEEN PUBLICLY EXHIBITED OR BROADCAST PRIOR TO THE ACQUISITION BY THE APPLICANT; (II) THE DISTRIBUTION OF SUCH A PRODUCTION OR WORK WAS COVERED BY OTHER INSURANCE FROM THE DATE OF ITS FIRST PUBLIC EXHIBITION; (III) THE APPLICANT DOES NOT CANCEL SUCH OTHER INSURANCE; (IV) SUCH OTHER INSURANCE NAMES THE APPLICANT AS AN ADDITIONAL INSURED; AND (V) SATISFACTORY EVIDENCE OF SUCH OTHER INSURANCE IS PROVIDED TO AND APPROVED BY THE COMPANY:

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

**SCHEDULE I – INDIVIDUAL WORK**  
**MEDIA PERILS INSURANCE**

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The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedules for each class of business for which coverage is requested.

Applicant's Name \_\_\_\_\_

**INFORMATION ABOUT THE WORK**

1. Title of Picture, Program, Series (the "Work"): \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Names of writer or author: \_\_\_\_\_  
\_\_\_\_\_

3. Is the Work based upon another work?  Yes  No  
If "yes", explain and list title, date and name of author of such work: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. Name(s) of individual producer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Name(s) of individual executive producer: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. Name(s) of individual director: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

7. The Work Is:

- |   |  |
|---|--|
| <input type="checkbox"/> Motion picture for:          | <input type="checkbox"/> Television series                           |
| <input type="checkbox"/> Theatrical release           | Number of episodes _____   |
| <input type="checkbox"/> Television release           | <input type="checkbox"/> Television "Mini Series"                    |
| <input type="checkbox"/> Videocassette or DVD release | <input type="checkbox"/> Television documentary                      |
| <input type="checkbox"/> Television pilot             | <input type="checkbox"/> Radio program                               |
| <input type="checkbox"/> Television special           | Number of programs each week _____                                   |
| <input type="checkbox"/> Dramatic                     | Number of weeks _____  |
| <input type="checkbox"/> Music/Variety/Comedy         | <input type="checkbox"/> Computer program                            |
| <input type="checkbox"/> Other: _____                 | <input type="checkbox"/> Interactive multimedia (CD ROM, CD 1, 3 D0) |
| _____   | <input type="checkbox"/> Book  |
| <input type="checkbox"/> Television reality           | <input type="checkbox"/> Other: _____                                |
| <input type="checkbox"/> Series                       | _____  |
| <input type="checkbox"/> Special                      | _____  |

Program or running time of the Work: \_\_\_\_\_

Initial release or air date: \_\_\_\_\_

Territory of broadcast or distribution: \_\_\_\_\_

8. If the Work is a reality program, series or other work, are any hidden cameras, practical jokes, dangerous stunts or highly embarrassing situations involved?

- Yes     No

If "yes", please explain: \_\_\_\_\_

\_\_\_\_\_

9. Is the Work

- Entirely fictional?
- Entirely fictional, but inspired by specific events and/or occurrences?
- A portrayal of actual facts which includes significant fictionalization?
- A true portrayal of actual facts or happenings?
- Other than above? (explain): \_\_\_\_\_

\_\_\_\_\_

10. Brief description of storyline: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

11. The time frame for the setting of the plot is (e.g. *The present, ten years in the future, within the last 20 years, etc.*):

\_\_\_\_\_

**INFORMATION ABOUT CLEARANCE**

12. Has a title report been obtained from any title clearance service?  Yes  No

If "yes", please indicate the name of service and attach copy. If "no", explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

13. Have copyright reports been obtained?  Yes  No

If "yes", are there any ambiguities, gaps or problems in the chain of title?  Yes  No

If no copyright report has been obtained, please explain the reason: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

14. Is the Work based upon, or does it include any literary or musical works, which were first published or registered for copyright prior to January 1, 1978?  Yes  No

If "no", disregard the rest of this question.

If "yes", please provide the following information:

(a) The title, writer's name, and year of first publication (or registration) for each such pre-1978 work:

Title	Writer's Name	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

(b) Did Applicant clear each of the works identified above to be certain that the Work will not infringe (now or in the future) the *renewal* copyrights to those works in light of the decision of the United States Supreme Court in *Stewart v. Abend*, 110 S.Ct.1750 (1990) (commonly referred to as the "Rear Window" case)?

Yes  No

If "yes", please describe the clearance procedures used to be certain that the Work will not infringe (now or in the future) the *renewal* copyrights to those pre-1978 works.

If "no", please explain why not.

(Attach additional sheets for the response, if necessary.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

15. Is the name or likeness of any living person used in the Work?  Yes  No

If "yes", have clearances been obtained?  Yes  No

If no clearance has been obtained, explain why not.

\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

16. Is there a plausible risk that a living person could claim (without regard to the merits) to be identifiable in the Work (whether or not the person's name or likeness is used or the production purports to be fictional)?

Yes  No

If "yes", have clearances been obtained?  Yes  No

If no clearances have been obtained, explain why not: \_\_\_\_\_

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17. Is the name or likeness of any deceased person used in the Work?  Yes  No

If "yes", have clearances been obtained from personal representatives, heirs or owners of such rights?

Yes  No

If no clearances have been obtained, explain why not: \_\_\_\_\_

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18. Has a fact research report (Marshall Plumb, Joan Pearce Report or similar report) been obtained? (Also known as a script clearance report.)

Yes  No

If "no", please explain: \_\_\_\_\_

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If "yes", have all necessary changes been made?  Yes  No

If "no", please explain: \_\_\_\_\_

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19. Will any film clips be used in this Work?  Yes  No

If "yes", have licenses and consents for the Film Clips been obtained as follows:

From copyright owners?  Yes  No

From writers and others?  Yes  No

From performers or persons appearing in clip?  Yes  No

From music owners?  Yes  No

If any of the answers above is "no", please explain: \_\_\_\_\_

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**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

20. Are any photographs used in the Work?  Yes  No

If "yes", have licenses and consents been obtained as follows:

From individuals or business depicted?  Yes  No

From copyright holders?  Yes  No

If any of the answers above is "no", please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

21. Have the following musical rights been cleared:

(a) Recording and synchronization?  Yes  No

(b) Performing rights?  Yes  No

(c) Right to distribute for all forms of distribution contemplated (home video, etc.)?  Yes  No

If the response to any of the above is "no", please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

22. Has a music cue sheet been prepared?  Yes  No

If "no", explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

23. If original music has been commissioned, has a "Hold Harmless" been obtained from the composer?

Yes  No

If "no", explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date



**SCHEDULE M - MERCHANDISE  
MEDIA PERILS INSURANCE**

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**The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.**

Applicant's Name \_\_\_\_\_

1. Describe in detail the type of merchandise contemplated (toys, dolls, clothing, etc.) and projected revenue anticipated:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. Is this merchandise derived from or based upon any other work or character?

Yes  No

If "yes", please explain and provide details: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

3. Is the merchandise based upon, or does it use the name, voice, likeness or image of any real individual?

Yes  No

If "yes", please explain: \_\_\_\_\_

\_\_\_\_\_

4. If merchandise is NOT based upon or derived from another work or character, please describe how this merchandise was created and developed and by whom. (Use attachment if space below is not sufficient.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

5. Does Applicant own or has Applicant acquired all rights necessary to produce this merchandise?

Yes  No

If "yes", please describe the rights acquired and how. If "no", please explain why not.

\_\_\_\_\_  
\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

6. Has Applicant filed any trademark or copyright registrations for any merchandise discussed above in the United States or any country throughout the world?

Yes  No

If "yes", please describe and attach list if necessary. \_\_\_\_\_

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7. Has Applicant performed or had performed any search for the pre-existing use of any other person or company of the merchandise or any trademark(s) applicant intends to exploit?

Yes  No

If "yes", please describe and attach list if necessary. If "no", please explain. \_\_\_\_\_

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8. What is the name, firm affiliation, address and phone number of Applicant's attorney, if different from the attorney listed on the General Application?

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9. What is the experience of the attorney with the acquisition of merchandising rights and the protection, licensing, production, distribution of merchandise?

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10. If merchandise rights have been acquired from and/or based upon property or works of others, what has been done to satisfy Applicant that all rights have been acquired from the proper party? Please describe the due diligence process.

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11. Has the Applicant obtained agreements in writing allowing the Applicant to create, produce, and distribute the merchandise from:

(a) Any actual individual whose name, voice, likeness and/or image is depicted in or on any merchandise?

Yes  No

(b) Any artist, composer, musician or other individual and/or entity whose work is being replicated or used in any manner on or in any merchandise?

Yes  No

If the response is "no" to either of the previous questions, please explain:

---

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

12. What percentage of the merchandise contemplated will be manufactured and distributed directly by the Applicant and what percentage will be manufactured and distributed by a third party licensee?

Applicant \_\_\_\_\_%      Licensee \_\_\_\_\_%

13. Of the merchandise manufactured by a third party licensee, does Applicant's licensing agreement require General Liability Insurance with the following minimum coverage: \$1,000,000 limits of insurance, including products liability, personal injury and advertising injury liability, and the Applicant added as an additional insured?

Yes     No

If "no", please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

14. Please provide the following:

- (a) Estimated gross receipts anticipated from the sale and license of this merchandise: \_\_\_\_\_
- (b) Anticipated profit to Applicant: \_\_\_\_\_
- (c) Number of units expected to be sold: \_\_\_\_\_

15. Has additional or separate insurance coverage for this merchandise been obtained?

Yes     No

If "yes", please state the company, the period of coverage and the type and scope of coverage afforded:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

16. Is Applicant aware of any existing Claims or situations that might give rise to a claim related to the merchandise described above?

Yes     No

If "yes", please explain: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

**SCHEDULE MCLP**  
**MUSIC COMPOSER/LYRICIST AND/OR MUSIC PUBLISHER**  
**MEDIA PERILS INSURANCE**

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The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.

Applicant's Name \_\_\_\_\_

1. Applicant is:

- Composer and/or Lyricist
- Music Publisher

If Applicant is an individual, attach a brief professional biography.  
If Applicant is other than an individual, attach information about the organization.

2. State Applicant's last three years and current estimated total annual gross receipts from music composing and/or publishing from the following sources:

	Year: _____	Year: _____	Current Year	Next Year
a. Mechanical Royalties	_____	_____	_____	_____
b. Performance Royalties	_____	_____	_____	_____
c. Sheet Music	_____	_____	_____	_____
d. Motion Picture or TV Productions	_____	_____	_____	_____
e. Theatrical Stage Productions	_____	_____	_____	_____
f. Foreign (All sources not included above)	_____	_____	_____	_____
g. Other (Describe) _____ _____	_____	_____	_____	_____

3. If Applicant is also a Musical Artist or Musical Group, please list the following:

(a) The names of all individuals presently comprising Artist or Musical Group: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(b) The names of any individuals previously comprising Artist or Musical Group.  
(This should include any other musical group and its members, in which the individual was a member.)  
\_\_\_\_\_  
\_\_\_\_\_

(c) The names of any past or present members who compose or have composed the music to be insured.  
\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

(d) If any past or present members of Applicant, or any other individuals, contribute or have contributed in any way to the compositions to be insured, please describe the contribution to any composition of these individuals.

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Is there any agreement in writing between the past or present members of Artist regarding their contribution to the compositions to be insured?  Yes  No

If "yes", please describe this agreement and, if necessary, attach a copy.

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4. The music to be insured is:

- Musical Composition(s)
- Music for Motion Pictures, TV Productions, or Other Audio-Visual Work
- Music for Stage Productions
- Other (Describe:) \_\_\_\_\_

5. Number of compositions in the Applicant's catalog: \_\_\_\_\_

Please attach a list of titles to be insured, including the following information for each composition or work:  
Title of each work; the composer(s) and/or lyricist(s); the genre or style; the publisher; the performing rights society; the copyright date; whether the work is currently covered by an in-force errors and omissions policy and the dates of that coverage

6. Number of:

- (a) Mechanical & Synchronized Licenses granted per year: \_\_\_\_\_
- (b) Compositions Published in Sheet or Folio form per year: \_\_\_\_\_

7. Average number of additional compositions:

- (a) Acquired per year: \_\_\_\_\_
- (b) Composed per year: \_\_\_\_\_

8. Attach Standard forms of Songwriters Agreements utilized by Applicant.

9. Percentage of:

- (a) Public Domain Compositions in Catalog: \_\_\_\_\_
- (b) Original Compositions in Catalog: \_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

10. Applicant is:

- (a) A member of ASCAP  Yes  No
- (b) Represented by BMI  Yes  No
- (c) Represented by SESAC  Yes  No

11. Does Applicant license mechanical rights?  Yes  No

- (a) Through the Harry Fox Organization?  Yes  No
- (b) Directly?  Yes  No
- (c) Through Others?  Yes  No State who: \_\_\_\_\_

12. Is Applicant a Member of the Musical Publisher Association of the United States?  Yes  No

13. Does Applicant administer the music library or catalog to be insured?  Yes  No

If "yes", list name and phone number of individual who is responsible: \_\_\_\_\_

If "no", list the following:

(a) Company or individual who is responsible: \_\_\_\_\_

(b) Address and phone number of individual or contact person: \_\_\_\_\_

(c) The basic terms: \_\_\_\_\_

14. Please describe process of review of new compositions to check for potential copyright infringement and other possible claims covered by the policy to be issued:

\_\_\_\_\_  
\_\_\_\_\_

15. Are compositions reviewed by any individual with an expertise in music?  Yes  No

16. If a potential concern is uncovered, how is this concern addressed?

\_\_\_\_\_  
\_\_\_\_\_

17. Is a musicologist ever used to review new compositions?  Yes  No

If "yes", please describe circumstances and list name and phone number of individual(s) typically used:

\_\_\_\_\_  
\_\_\_\_\_

If "no", please explain why not: \_\_\_\_\_

\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

18. Is sampling (music or sounds) ever used in the work of Applicant?  Yes  No

If "yes":

(a) What is the Applicant's practice, policy and procedure relating to these samples?

---

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(b) Are licenses obtained from the owner of the source material?  Yes  No

If no licenses are obtained, please explain when they are not and why: \_\_\_\_\_

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19. Has a Title report been obtained from any of the title clearance services?  Yes  No

If "yes", please indicate the name of the service and attach a copy of the report. If "no", explain:

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\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

## SCHEDULE PER – PERFORMERS MEDIA PERILS INSURANCE

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**The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.**

Applicant's Name \_\_\_\_\_

1. Applicant engages in the following type of performances:

- |                                     |                                     |   |
|-------------------------------------|-------------------------------------|---|
| <input type="checkbox"/> Nightclubs | <input type="checkbox"/> Lectures   | <input type="checkbox"/> Other (Describe) |
| <input type="checkbox"/> Musical    | <input type="checkbox"/> Television | _____                                     |
| <input type="checkbox"/> Radio      | <input type="checkbox"/> Concerts   | _____                                     |

2. Describe the content of the performances, noting if they include any of the following:

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Music          | <input type="checkbox"/> Historical Reports   | <input type="checkbox"/> Documentary Reports |
| <input type="checkbox"/> Comedy         | <input type="checkbox"/> Religious Sermons    | <input type="checkbox"/> Television          |
| <input type="checkbox"/> Drama          | <input type="checkbox"/> Impersonations       | <input type="checkbox"/> Theatrical          |
| <input type="checkbox"/> News Reporting | <input type="checkbox"/> Political Activities | <input type="checkbox"/> Other (Describe)    |
- \_\_\_\_\_
- \_\_\_\_\_

3. Does Applicant regularly perform from prepared material or does Applicant use both prepared material and "Off the Cuff" elements and remarks?

\_\_\_\_\_

4. Material for Applicant's performances is prepared by:

- Professional writers and composers
- Applicant
- Others (explain): \_\_\_\_\_

5. At the present time, does Applicant obtain Indemnities from those preparing his or her material?

- Yes  No

6. State briefly Applicant's clearance procedures. (Those designed to reduce the potential for claims of the type to be insured against herein.)

\_\_\_\_\_

\_\_\_\_\_



**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

7. (a) If Applicant is a musical performer, does the Applicant compose his/her own music?  Yes  No

If "yes", explain: \_\_\_\_\_

(b) Does the Applicant engage in the business of music publishing or own any compositions?

Yes  No

If "yes", explain and attach a list of compositions listed in the Applicant's music publishing catalog:

\_\_\_\_\_  
\_\_\_\_\_

8. Does Applicant utilize any photographs, artwork, film clips, video products, trademarks, computer graphics, computer generated art or other images or any other third party work as any part of his or her performance or as a background, set dressing or a visual aid?

Yes  No

If "yes", answer the questions below:

(a) Please describe the work used: \_\_\_\_\_

\_\_\_\_\_

(b) Does the Applicant clear the following rights?

Copyright Holder  Yes  No

Author/Writer  Yes  No

Persons appearing or depicted in the work  Yes  No

Business depicted in the work  Yes  No

Owners of any products, including trademarks, depicted  
in the work or used as part of the performance  Yes  No

Music owners  Yes  No

If the answer to any of the above is "no", please explain: \_\_\_\_\_

\_\_\_\_\_

9. State Applicant's actual and estimated total annual gross receipts from all sources:

Next Year \_\_\_\_\_

Current Year \_\_\_\_\_

First Previous Year (20\_\_\_\_) \_\_\_\_\_

Second Previous Year (20\_\_\_\_) \_\_\_\_\_

10. Attach standard forms of Performers Agreements used by Applicant.

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

## SCHEDULE ST – SOUNDTRACK MEDIA PERILS INSURANCE

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**The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedules for each class of business for which coverage is requested.**

Applicant's Name \_\_\_\_\_

1. Will a soundtrack, CD or audio cassette be produced and distributed separate from the Declared Production Activity?

Yes  No

If "yes", please list:

Producer: \_\_\_\_\_

Distributor: \_\_\_\_\_

Territory of Distribution: \_\_\_\_\_

2. Will the soundtrack contain any material not contained in the Declared Production Activity?

Yes  No

If "yes", please provide a list of all material to be contained on the soundtrack, which includes the following information: composition, recording artist, composer, publisher, performing rights society, style of music, new release or previous release, original release date. Please attach a list if necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. If the Applicant will not produce and distribute the soundtrack, is the Applicant indemnified for claims arising out of material contributed to the soundtrack by the producer, distributor or any third party providing material to the soundtrack to be distributed?

Yes  No

If "no", please explain: \_\_\_\_\_

\_\_\_\_\_

4. Please provide the following:

(a) Anticipated Gross Proceeds \_\_\_\_\_

(b) Anticipated Profit to Applicant \_\_\_\_\_

(c) Number of Units expected to be sold. \_\_\_\_\_

5. Have the following musical rights been cleared:

(d) Recording and synchronization?  Yes  No

(e) Performing rights?  Yes  No

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(f) Right to distribute for all forms of distribution contemplated (home video, etc.)?  Yes  No

If the response to any of the above is "no", please explain: \_\_\_\_\_

6. Does the soundtrack include any literary or musical works that were first published or registered for copyright prior to January 1, 1978?  Yes  No

If "no", disregard the rest of this question.

If "yes", please provide the following information:

(a) The title, writer's name, and year of first publication (or registration) for each such pre-1978 work:

Title	Writer's Name	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

(b) Did Applicant clear each of the works identified above to be certain that the soundtrack will not infringe (now or in the future) the *renewal* copyrights to those works in light of the decision of the United States Supreme Court in *Stewart v. Abend*, 110 S.Ct.1750 (1990) (commonly referred to as the "Rear Window" case)?

Yes  No

If "yes", please describe the clearance procedures used to be certain that the soundtrack will not infringe (now or in the future) the *renewal* copyrights to those pre-1978 works.

If "no", please explain why not.

(Attach additional sheets for the response, if necessary.) \_\_\_\_\_

7. If original music has been commissioned, has a "Hold Harmless" been obtained from the composer?

Yes  No

If "no", explain: \_\_\_\_\_

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date

## SCHEDULE W – WEBSITE CONTENT MEDIA PERILS INSURANCE

**The General Application must be completed before completing this Schedule. The Applicant must complete separate Schedule(s) for each class of business for which coverage is requested.**

Applicant's Name \_\_\_\_\_

### INFORMATION ABOUT THE SITE(S) AND COVERAGE DESIRED

1. State Applicant's actual and estimated total annual gross receipts from all sources:

Next Year \_\_\_\_\_

Current Year \_\_\_\_\_

First Previous Year (20\_\_\_\_) \_\_\_\_\_

Second Previous Year (20\_\_\_\_) \_\_\_\_\_

2. Internet Activities:

a. Please identify the Internet site(s) for which coverage is sought (including the URL), the date each site first went online, and the average number of page views per month:

Internet Site (Including URL)	Date Online	Average Page Views per Month

**IMPORTANT:** If any of the above sites are not yet online, please attach a complete description of the proposed site(s).

b. Is coverage desired for outgoing email originating from the Applicant or the Applicant's employees?

Yes  No

If "yes", please identify the domain name from which all such email originates:

\_\_\_\_\_

c. Is coverage desired for any other publications or communications not identified above?

Yes  No

If "yes", please describe such publications and whether they contain content that is different from, or in addition to the content of the website identified above:

\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

**CONTENT OF SITE**

3. Do any of the Internet sites identified in question 1.a. above contain any of the following content, transact business in any of the following areas, or sell/make available any of the following products/ services:

- a. Information relating to treatment or care of medical conditions or use of health care products or medical devices?  Yes  No
- b. Financial services, including banking, insurance, or investment services?  Yes  No
- c. Gambling, lotteries or other games of chance?  Yes  No
- d. Professional services, such as legal services, accounting services, medical services or other services which must be provided by licensed professionals?  Yes  No
- e. Music, videos or software available to be downloaded by users?  Yes  No
- f. Guns, weapons, or other products or content of a violent nature?  Yes  No
- g. Drugs, pharmaceutical products or medical devices?  Yes  No

4. On any of the websites identified in question 1.a., does the Applicant collect personal information, such as names or addresses, regarding visitors to the site?  Yes  No  
If "yes", is any of this personal information sold or otherwise disclosed to third parties?  Yes  No  
If "yes" to either of the foregoing questions, are these activities disclosed in a prominent manner to visitors of the site?  Yes  No

5. Is electronic commerce conducted on any of the websites identified in 1.a. above?  Yes  No  
If "yes", are these transactions administered by the Applicant, or are they administered by an independent contractor?

\_\_\_\_\_  
Name of Independent Contractor (if applicable): \_\_\_\_\_

6. When the Applicant provides links to other sites, is the link to the first page of those other sites, or is the link to internal pages?  
 First page only  Occasionally links to internal pages  
If Applicant occasionally links to internal pages, is it ever done without the permission of the third party that operates the site?  
 Yes  No

7. What percentage of the content on the Applicant's Internet site(s) is obtained from third parties? \_\_\_\_%

8. What percentage of the monthly page views on the Applicant's site(s) originate from outside the United States? \_\_%

9. Describe the security measures used on the Applicant's Internet site(s): \_\_\_\_\_  
\_\_\_\_\_

**INFORMATION ABOUT CLEARANCE**

10. Do any of the Internet sites identified in question 1.a. above include any literary or musical works that were first published or registered for copyright prior to January 1, 1978?  Yes  No

If "no", disregard the rest of this question.

If "yes", please provide the following information:

a. The title, writer's name, and year of first publication (or registration) for each such pre-1978 work.

Title	Writer's Name	Year
_____	_____	_____
_____	_____	_____
_____	_____	_____

b. Did Applicant clear each of the works identified above to be certain that the site(s) will not infringe (now or in the future) the *renewal* copyrights to those works in light of the decision of the United States Supreme Court in *Stewart v. Abend*, 110 S.Ct.1750 (1990) (commonly referred to as the "Rear Window" case)?

Yes  No

If "yes", please describe the clearance procedures used to be certain that the Applicant's site(s) will not infringe (now or in the future) the *renewal* copyrights to those pre-1978 works.

If "no", please explain why not.

(Attach additional sheets for the response, if necessary.) \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

11. Is the name or likeness of any living person used on the site(s)?  Yes  No

If "yes", have clearances been obtained?

Yes  No

If no clearance has been obtained, explain why not.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Is there a plausible risk that a living person could claim (without regard to the merits) to be identifiable on the site(s) (whether or not the person's name or likeness is used or the production purports to be fictional)?

Yes  No

If "yes", have clearances been obtained?  Yes  No

If no clearances have been obtained, explain why not: \_\_\_\_\_

\_\_\_\_\_

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

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13. Is the name or likeness of any deceased person used on the site(s)?  Yes  No

If "yes", have clearances been obtained from personal representatives, heirs or owners of such rights?

Yes  No

If no clearances have been obtained, explain why not: \_\_\_\_\_

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14. Will any film clips be used on the site(s)?  Yes  No

If "yes", have licenses and consents for the film clips been obtained as follows:

From copyright owners?  Yes  No

From writers and others?  Yes  No

From performers or persons appearing in clip?  Yes  No

From music owners?  Yes  No

If any of the answers above is "no", please explain: \_\_\_\_\_

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15. Are any photographs used on the site(s)?  Yes  No

If "yes", have licenses and consents been obtained as follows:

From individuals or business depicted?  Yes  No

From copyright holders?  Yes  No

If any of the answers above is "no", please explain: \_\_\_\_\_

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16. Have the following musical rights been cleared:

(g) Recording and synchronization?  Yes  No

(h) Performing rights?  Yes  No

(i) Right to distribute for all forms of distribution contemplated?  Yes  No

**MEDIA PERILS LIABILITY INSURANCE APPLICATION**

If the response to any of the above is "no", please explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

17. If original music has been commissioned, has a "Hold Harmless" been obtained from the composer?

Yes  No

If "no", explain: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Applicant (Print Name)

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Attorney's Signature

\_\_\_\_\_  
Date