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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **1. Your business** | | | Name | |  | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Address | |  | | | | | | | | | | | | | | | | | |
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|  | | | Postcode | |  | | | |  | | | | | | | | | | | | | |
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|  | | | Email address: | | : | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Website | |  | | | | | | | | | | | | | | | | | |
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| **2. Business experience** | | | When was your business established? | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Please list the industry experience of each partner/director below: | | | | | | | | | | | | | | | | | | | |
|  | | | Name | | | | Years in the industry | | | Previous employers | | | | | | | | | | | | | |
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|  | | | Are you members of the Advertising Producers Association? | | | | | | | | | | | | | | | | Yes  No | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | What percentage of production personnel are union members? | | | | | | | | | | | | | | | | | | % | |
|  | | |  | | | | | | | | | | | | | | | | | |  | |
| **3. Production activities** | | | Please provide a breakdown split of the productions undertaken: | | | | | | | | | | | | | | | | | | | |
|  |  |  | Location production - UK | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Location production - overseas | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Studio production - UK | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Studio production - overseas | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Stills photography - UK | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Stills photography - overseas | | | | | | | | | | | | | | | | | | % | |
|  |  |  |  | | | | | | | | | | | | | | | | | | **100**% | |
|  |  |  | TV/cinema commercials | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Web-based commercials | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Educational films/corporate videos | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Music videos | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Animation/stop-frame | | | | | | | | | | | | | | | | | | % | |
|  |  |  | Idents | | | | | | | | | | | | | | | | | | % | |
|  |  |  |  | | | | | | | | | | | | | | | | | | **100**% | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Please provide the following: | | | | | | | | | | | | | | | | | | | |
|  | | | Annual production costs for the last 12 months | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Estimated production costs for the next 12 months | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Estimated average production cost per contact | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Maximum foreseeable production cost per contract | | | | | | | | | |  | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Will you be: | | | | | | | | | | | | | | | | | | | |
|  | | | Filming on 35mm or 16mm? | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Using high definition, special film processes or equipment? | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Filming in aerial, waterborne or sub-marine conditions? | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | If Yes to any of the above, please give details: | | | | | | | | | | | | | | | | | | | |
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|  | | | Average frequency of processing media? | | | | | | | | Days |  | | | Hours | | | | | | |  |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Will any productions be shot outside of the EU? | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| **4. Coverage required** | | | Section A – Production indemnity | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Limit of indemnity per production: | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Section B – Media indemnity | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Limit of indemnity per production: | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Section C – Technical equipment | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Hired equipment limit: | | | | | | | | | | | | |  | | | | | | |
|  | | | Owned equipment limit: | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Section D – Props, sets and wardrobe | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Hired props, sets, wardrobe limit: | | | | | | | | | | | | |  | | | | | | |
|  | | | Owned props, sets, wardrobe limit: | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Section E – Third party property damage | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Third party property damage limit: | | | | | | | | | | | | |  | | | | | | |
|  | | | Loss of hire fees limit: | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Section F – Money indemnity | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Limit of indemnity per loss: | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Section G – Public liability | | | | | | | | | | | | | Yes  No | | | | | | |
|  | | | Limit of Indemnity per loss:(costs inclusive) | | | | | | | | | | | | |  | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Territorial limit required: | | | | | | | | | | | | |  | | | | | | |
|  | | | European Union including UK | | | | | Worldwide excluding USA/Canada | | | | | | | | | Worldwide\* | | | | | |
|  | | | \* Legislation varies from state to state in North America, and special certification, issued by a US domiciled insurer, may be needed where the local USA Film and TV permit office or any other relevant authority requires it. | | | | | | | | | | | | | | | | | | | |
| Location of business income & activities  Have you ever or do you plan to: work or contract with; or make any payments to, any person, entity or organisation that is domiciled in or operates in any way from; or travel to the following countries, | | | | | | | | | | | | | | | | | | | | | | |
| ☐ No ☐ Yes, please select,  ☐ Afghanistan, ☐ Belarus, ☐ Cuba, ☐ Iran, ☐ Myanmar, ☐ North Korea, ☐ Russia, ☐ Syria, ☐ non-Government controlled areas of Ukraine, ☐ Venezuela | | | | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | |  | | | | |
| **5. Insurance history** | | | | Do you at present have commercial producers indemnity insurance? | | | | | | | | | | | | | | | Yes  No | | | | |
|  | | | If Yes, please provide details: | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
|  | | | Has any insurer to whom you have applied ever declined any proposal for commercial producers indemnity or similar insurance? | | | | | | | | | | | | | | | Yes  No | | | | |
|  | | | If Yes, please give date and details below: | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | Have you suffered any claim or direct financial loss, whether insured or not arising from: | | | | | | | | | | | | | | | | | | | |
|  | | | a. | The delay, interruption, cancellation or abandonment of a production? | | | | | | | | | | | | | | | | Yes  No | | |
|  | | | b. | Loss of or damage to any property being used in or for the production (including mobile telephone and money losses)? | | | | | | | | | | | | | | | | Yes  No | | |
|  | | | c. | Your legal liability to any third party arising out of your production activity? | | | | | | | | | | | | | | | | Yes  No | | |
|  | | | If Yes, to any of the above, please provide full details: | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| **6. Material information** | | | Please provide us with details of any other information which may be relevant to our consideration of your proposal for insurance. If you have any doubt over whether something is relevant, please let us have details: | | | | | | | | | | | | | | | | | | | |
|  | | |  | | | | | | | | | | | | | | | | | | | |
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| **7. Payment** | | | Please indicate your preferred method of payment: | | | | | | |  | | | |  | | | | | | | | |
|  | | | Single payment | | | Direct Debit (12 months) | | | | | | | | | | | | | | |  | |
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| **8. Declaration** | | I/we confirm that the information given in this proposal form is correct, accurate and complete and I have made a fair presentation of the risk. | | | |
|  | | | | | |
|  | | Signature of Principal/Partner/ Director |  | Date |  |
|  |
|  | | | | | |
|  | By signing this HPI CPI (2010) Form you consent to Hiscox using the information we may hold about you for the purpose of providing insurance and handling claims, if any, and to process sensitive personal data about you where this is necessary (for example health information or criminal convictions). This may mean we have to give some details to third parties involved in providing insurance cover. These may include insurance carriers, third-party claims adjusters, fraud detection and prevention services, reinsurance companies and insurance regulatory authorities. Where such sensitive personal information relates to anyone other than you, you must obtain the explicit consent of the person to whom the information relates both to the disclosure of such information to us and its use by us as set out above**.** The information provided will be treated in confidence and in compliance with the Data protection Act 1998. You have the right to apply for a copy of your information (for which we may charge a small fee) and to have any inaccuracies corrected. | | | | |
|  | **A copy of this proposal should be retained for your records.** | | | | |