

This application and all related information submitted with it will become "public record" under the Louisiana Public Records Act, in Title 44 of Louisiana Revised Statuses, except for those materials excluded by said Act. If the applicant feels that the information being submitted is excluded by said Act, then please provide a cover sheet stating that "DOCUMENTS CONTAIN CONFIDENTIAL PROPRIETARY OR TRADE SECRET INFORMATION" and mark each individual page as such. Claiming confidentiality may not supersede Louisiana Public Records Law.

Project Title		Date	
Production Type	TV Episode	Feature Film	Music Video
Production Company			
City	State	Zip	Phone
Email			
Other Contact		Cell	
Producer		Cell	
Email			· · · · · · · · · · · · · · · · · · ·
Other Contact			
Director		Cell	
Email			
Other Contact			
Production Supervisor		Cel	I
Email			
Dates of Production	/ /	to	_//
Total Number of Days			·· ·
		. Bernard /_	/
Estimated end date of c	urrent production in St.	Bernard/_	/
Production Budget			
Estimated St. Bernard sp			
Has this company previo	ously received any St. Be	ernard film incentives	s? (yes or no)
If yes, please list the nar	me and date of the prod	uction for which pric	or incentives were received:
Name of previous produ	iction		
Date of previous produc	tion		
Have you secured hotel	rooms for your crew? _	(yes or	no)
If yes, name of hotel			

LOCATION INFORMATION

Is your production office lo	cated within St. Bernard Parish?	Yes	No
Is your production utilizing	a sound stage, studio, or alternative ⁻	filming facilities in St	. Bernard Parish?
Yes	No		
Do you have a lease or rent	al agreement for any of the above fa	cilities in St. Bernard	Parish?
Yes	No		
If yes, please provid	de the address of the facility and atta	ch a copy of the leas	e to this form.
Address			
City	State	Zip	

QUALIFIED EXPENDITURES

Have you incurred or will you incur production related expenditures, paid within St. Bernard Parish, amounting to an overall total of at least \$200,000 in any of the following categories?

- A. Lodging expenses for cast and crew incurred in St. Bernard Parish establishments which pay sales hotel/motel, occupational, and ad valorem taxes in the Parish. _____Yes _____ No
- B. Payroll expenses of cast and crew who are residents of St. Bernard Parish. _____ Yes _____ No
- C. Lease or rental expenses for sound stage, location, or production offices paid for a site in St. Bernard Parish and which pays occupational licenses or ad valorem tax in the Parish or holds an exemption from payment of such taxes. _____Yes _____No
- D. Any other production expenses incurred in an establishment located within St. Bernard Parish. _____Yes _____ No

Please check all that apply:

_____ Street Closures

_____ Traffic Control

- _____ Use of Parish Buildings
- Pyrotechnics/Fire/Gunfire

Other services needed, please explain:

Insurance Company ______

NOTE: ALL LOCATIONS MUST BE PROVIDED NO LESS THAN 14 DAYS PRIOR TO PRODUCTION

I hereby certify that the information provided in this application is true and correct, and I am aware that my submission of any false information or omission of any pertinent information resulting in the false representation of a material fact may subject me to civil and/or criminal penalties for filing of false public records and/or forfeiture of any incentives approved under this program. I also understand that any final certification of any incentive will be subject to the submission & review of an independent audit conducted by a Certified Professional Accountant licensed in the state of Louisiana; those employees that are claimed as St. Bernard Parish hires must each fill out a "Declaration of Residency" form showing St. Bernard residency at least 6 months prior to hire to be kept on. File by the production company.

Additionally, I agree that the finished product shall contain an acknowledgment that the production was filmed in St. Bernard Parish and such brand/logo shall be included in the credits. Finally, I understand that this application and information submitted with it shall not be returnable to the applicant.

I have read and agree to the above Terms & Conditions.

Signature	Title
Name	Date