

# ST. BERNARD PARISH FILM INCENTIVE PRELIMINARY QUESTIONNAIRE Completed applications and attachments can be sent to St. Bernard Parish Office of Tourism and Film ATTN: Katie Tommaseo 409 Aycock Street Arabi, LA 70032 <u>ktommaseo@sbpg.net</u> (504) 278-4242

### PLEASE SUBMIT THE FOLLOWING REQUIRED FOR PRE-APPROVED REBATE

(1) detailed preliminary budget including above & below the line hires
 (2) detailed distribution plan (3) script synopsis (4) lease

(5) crew list (6) location breakdown (7) preliminary questionnaire

This application and all related information submitted with it will become "public record" under the Louisiana Public Records Act, in Title 44 of the Louisiana Revised Statutes, except for those materials 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.

#### **CONTACT INFORMATION**

Company Name	Date
Contact Name	Title
Address	
City Sta	te Zip
Phone	Email
Website	
Has this company received St. Bernard Parish fi	m incentives previously?Yes No
If yes, please list the name and date of the proc	luction for which prior incentives were issued:
Name	Date / /

#### **CURRENT PRODUCTION INFORMATION**

Production Name			
Production Description (film, movie, series, etc.)			
Producer	Email _		
Director	Email		
Location Manager Email		_ Email	

Production Supervisor	Email
Estimated Start Date:	Estimated End Date:
Total Production Budget: \$	Estimated St. Bernard Expenditures: \$

#### LOCATION INFORMATION

Is your production office located within St. Bernard Parish? \_\_\_\_\_Yes \_\_\_\_\_No Is your production utilizing a sound stage, studio, or alternative filming facility located in St. Bernard

parish? \_\_\_\_\_Yes \_\_\_\_\_No Do you have a lease or rental agreement for any of the above facilities in St. Bernard Parish? Yes No If yes, please provide the address of the facility and attach a copy of the lease to this form. 
 Address \_\_\_\_\_\_

 City \_\_\_\_\_\_
 State \_\_\_\_\_\_
 Zip \_\_\_\_\_\_

## QUALIFYING 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. Cost Approximation: \$
- B. Payroll expenses of cast and crew who are, and for a period of at least six months prior to commencing work on the production of the project were residents of St. Bernard Parish. Cost Approximation: \$
- C. Lease or rental expenses for sound stage, location or production offices, or filming site in St. Bernard Parish.

Cost Approximation: \$

D. Any other production expenses incurred in an establishment or registered business within St. Bernard Parish which pays local sales tax in the parish. Cost Approximation: \$

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 a false public record and/or forfeiture of any incentives approved under this program. I also understand that any final certification for this incentive will be subject to the submission & review of an independent audit conducted by a Certified Professional Accountant (CPA) 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 \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_

St.Bernard

Title \_\_\_\_\_

**St. Bernard Economic Development Foundation** 

St. Bernard Parish Office of Tourism & Film



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