



APPLICATION FOR COMPOSERS AND LYRICISTS
ERRORS & OMISSIONS LIABILITY INSURANCE

NOTICE: This is an Application for a "NAMED PERILS" CLAIMS MADE POLICY. Except to such extent as may be provided otherwise herein, any insurance Policy which may issue hereafter will be limited to liability for only those CLAIMS THAT ARE FIRST MADE AGAINST THE INSURED DURING THE POLICY PERIOD. Please read and review this Application carefully and discuss the coverage with your insurance agent, broker or representative.

- 1. Name of Applicant:
2. Street & Mailing Address:
3. Applicant is a: Corporation Individual Other (Explain):
4. If a Corporation, the Officers are:
5. If a Partnership, the general and limited partners are:
6. Years in Business: Under Present Name:
7. Names and addresses of all subsidiaries, state of incorporation, and percentage of ownership by Applicant:
8. Affiliations with other firms:
9. Is the Applicant engaged in any Business or Profession other than as described above? Yes No
If "Yes," explain:
10. The Work to be insured is a:
Musical Composition(s) Music for Motion Picture of TV Productions
Dramatic or Dramatico-Musical Composition Theatrical Stage Production
Other (Describe)
11. Title of Works:
12. Desired effective date: for a term of year(s).

COMPOSTER AND LYRICISTS ERRORS & OMISSIONS LIABILITY INSURANCE APPLICATION (Cont'd)

13. Limit of Coverage desired: _____ Any one claim and in the aggregate \$ _____
Deductible \$ _____

NOTE: Costs are inclusive within both Limit of Liability and Deductible Amount.

14. State Applicant's last 3 years and current Estimated Annual Gross Revenues from all Sources:

	Year	Year	Year	Year
(a) Musical Compositions:	_____	_____	_____	_____
(b) Motion Picture or TV Productions:	_____	_____	_____	_____
(c) Theatrical Stage Productions:	_____	_____	_____	_____
(d) Other (describe):	_____	_____	_____	_____

15. Name, Address and Phone of Applicant's Attorney who clears Literary, Musical and other Materials: _____

Phone: _____

16. State briefly Applicant's Clearance Routines: _____

17. Has title report been obtained from any of the title clearance services? Yes No
If so, name of clearance service (attach copy of report): _____

18. Has Applicant's Attorney approved as adequate the steps taken by Applicant as respects Clearance of Rights? Yes No

19. Is applicant:
(a) a member of ASCAP? Yes No
(b) Represented by BMI? Yes No
(c) Represented by SESAC? Yes No
(d) Represented by others? Yes No State who: _____

20. Does Applicant license mechanical rights? Yes No
(a) Through the Harry Fox Organization? Yes No
(b) Directly? Yes No
(c) Through Others? Yes No

COMPOSTER AND LYRICISTS ERRORS & OMISSIONS LIABILITY INSURANCE APPLICATION (Cont'd)

21. Please provide below full particulars of all similar Insurance carried in the past five (5) years:

Name of Insurer	Policy Period From: Mo/Day/Year To: Mo/Day/Year	Limits of Liability	Deductible
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

22. Does any person proposed for this Insurance have any knowledge of any act, error or omission which might give rise to a claim against the Firm or Themselves? Yes No

If "Yes," **attach full particulars.**

23. (a) Has the Applicant been sued or have claims been made in the past five years for defamation, invasion of privacy, plagiarism, piracy, copyright infringement or unfair competition? Yes No

If "Yes," Please describe: _____

(b) Number of Judgments rendered: _____ Amount of each Judgment: _____

(c) Number of Settlements before Trial: _____ Amount of each Settlement: _____

(d) Do you have any claims or suits pending? Yes No State facts concerning each claim or suit:

24. **Attach standard forms of Performer's Agreements utilized by Applicant.**

25. **Attach brief Professional Biography of Applicant (or use other side).**

26. 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

27. Applicant agrees that it will use due diligence to determine whether any matter or materials to be used in the Insured Work 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.

Please Initial

