



APPLICATION FORM FOR FINAL RULING OF A CO-PRODUCTION PROJECT

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FOR OFFICE USE ONLY	
REFERENCE NUMBER	DATE OF RECEIPT / DATE STAMP

A.	APPLICANT AND PRODUCTION DETAILS
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A1.	TITLE OF PROJECT	
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A2.	CONTACT PERSON FOR THIS FILE (please sign last page of this application form)	
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A3. DETAILS OF SOUTH AFRICAN COMPANY		
	<ul style="list-style-type: none"> TITLE OF PROJECT / PREVIOUS TITLE OF PROJECT (if any) 	
	<ul style="list-style-type: none"> NAME OF SOUTH AFRICAN COMPANY/IES (if more than one, please annex details of others) 	
	<ul style="list-style-type: none"> TYPE OF CORPORATE ENTITY (eg PTY LTD, Partnership, Special Purpose Vehicle (SPV ETC) (if more than one, please annex details of others) 	
	<ul style="list-style-type: none"> DATE OF INCORPORATION OF THE PRODUCTION COMPANY 	
	<ul style="list-style-type: none"> REGISTRATION NUMBER 	
	<ul style="list-style-type: none"> BUSINESS ADDRESS 	Physical Address
		City
		Code
		Country
		Tel
		Fax
		E-mail
		Postal Address
		City
		Code



A4. NAME OF HOLDING COMPANY			
Name of Holding Company (if applicable)		Name of Foreign Holding Company (if applicable)	
Company Registration Number		Company Registration Number	
Date of Incorporation		Date of Incorporation	
Business Address		Business Address	
Tel	+	Tel	+
Fax	+	Fax	+
E-mail		E-mail	



A5. FOREIGN PRODUCTION COMPANY		
• NAME OF FOREIGN PRODUCTION COMPANY / IES (if more than one, please annex details of others)		
• TYPE OF CORPORATE ENTITY (eg PTY LTD, Partnership, Special Purpose Vehicle (SPV ETC) (if more than one, please annex details of others)		
• DATE OF INCORPORATION OF THE PRODUCTION COMPANY		
• REGISTRATION NUMBER		
• BUSINESS ADDRESS	Physical Address	
	City	
	Code	
	Country	
	Tel	
	Fax	
	E-mail	
	Postal Address	
	City	
Code		
• FOREIGN PRODUCER		

HAS THIS PROJECT ALREADY BEEN SUBMITTED TO THE NATIONAL FILM AND VIDEO FOUNDATION OR ANY OTHER GOVERNMENT DEPARTMENT?	
No	<input type="checkbox"/>
Yes	<input type="checkbox"/>
If Yes, please specify	



CATEGORY	GENRE	ORIGINAL LANGUAGE	DUBBED VERSION
Feature Film	Sci-Fi	English	English
Documentary	Family	French	French
Short	Children	German	German
Pilot	Drama	Italian	Italian
One-off	Other	Other	Other
Mini Series	Please specify	Please specify	Please specify
Series	_____	_____	_____
MOW	_____	_____	_____

SHOOTING FORMAT

VIDEO	FILM	MULTIMEDIA
Betacam	16 mm	DC - ROM
Digital Betacam	Super 16 mm	DVD
High Definition	35 mm	Online
DVDcam	Super 35 mm	Other
Other	Other	Please specify
Please specify	Please specify	_____
_____	_____	_____
_____	_____	_____



B.	LOCATION DETAILS
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Location, Dates and Duration of Shooting / Key Animation									
COUNTRY	DATE			DATE			DURATION (in days)		
	Year	Month	Day	Year	Month	Day	Year	Month	Day
		FROM			TO				
	Year	Month	Day	Year	Month	Day			Total Duration
	Year	Month	Day	Year	Month	Day			Total Duration
	Year	Month	Day	Year	Month	Day			Total Duration
	Year	Month	Day	Year	Month	Day			Total Duration



	NAME OF FACILITY	GEOGRAPHICAL LOCATION									
						DATE					DURATION (in days)
POST PRODUCTION SOUND				FROM				TO			
			Year	Month	Day		Year	Month	Day		Total Duration

	NAME OF FACILITY	GEOGRAPHICAL LOCATION									
						DATE					DURATION (in days)
POST PRODUCTION VIDEO				FROM				TO			
			Year	Month	Day		Year	Month	Day		Total Duration

	NAME OF FACILITY	GEOGRAPHICAL LOCATION									
						DATE					DURATION (in days)
POST PRODUCTION SFX				FROM				TO			
			Year	Month	Day		Year	Month	Day		Total Duration



C. RIGHTS AND CHAIN OF TITLE

The Applicant must be the originator of the script, treatment or outline concerned, or be the holder of copyright or have an option to the rights in any and all works on which the project is to be based. Please include Chain of Title documentation and proof of copyright.

If the screenplay is based on an original work			
Title of Original Work	Author	Nationality	Original Language



D.	PARTICIPATION – FICTION AND DOCUMENTARIES
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Participants Fiction / Documentary	Surname	First Name (s)	Gender	Race	Nationality (please state citizen / permanent resident)	Passport / Identity Number
SOUTH AFRICAN PRODUCER (S)						
FOREIGN PRODUCER (S)						
EXECUTIVE PRODUCER (S)						
HEAD SCRIPTWRITER						
SCRIPTWRITER (S)						
DIRECTOR (S)						
DIRECTOR (S) OF PHOTOGRAPHY						
PRODUCTION DESIGNER						
PICTURE EDITOR (S)						
MUSIC COMPOSER						



E. PARTICIPATION – ANIMATION

Participants Animation	Surname	First Name (s)	Gender	Race	Nationality (please state citizen / permanent resident)	Passport / Identity Number
SOUTH AFRICAN PRODUCER (S)						
FOREIGN PRODUCER (S)						
EXECUTIVE PRODUCER (S)						
HEAD SCRIPTWRITER						
SCRIPTWRITER (S)						
DIRECTOR (S)						
STORYBOARD SUPERVISOR (S)						
DESIGN SUPERVISOR / ART DIRECTOR (S)						
CHARACTER MODEL SUPERVISOR (S) (3D)						
MOTION CAPTURE SUPERVISOR (S)						
ANIMATION DIRECTOR (3D)						
MUSIC COMPOSER (S)						
PICTURE EDITOR (S)						



G.	PARTICIPATION – FINANCING
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SOURCES OF SOUTH AFRICAN FINANCING	Specify Legal Name of Company or Organisation	Amount in Rand
Funding:		
• Development – Loan / Grant / Equity		
• Production – Loan / Grant / Equity		
DTI Film and Television Production Rebate		
Equity Investors		
Loan / Debt Finance		
South African Private Investors		
Other Funds and Donors		
South African Distributor		
South African Broadcaster (s)		
Confirmation of Bank Financing		
Deferrals		
Other (s) (please specify)		



Sources of Foreign Financing	Specify legal name of company or organisation	Amount in Rand	Amount in Foreign Currency
Funding :			
• Development – Loan / Grant / Equity			
• Production – Loan / Grant / Equity			
Loan / Debt Finance			
Equity Investment			
Sales and Leaseback			
Foreign Distributor (s)			
Foreign Broadcaster (s)			
Private Funds			
Public Funds			
Tax Credit (s)			
Other (s) Please specify			
Foreign Production Financing		% R	
Total Estimated Production Funding		100% R	



H. DETAILS ON THE SOUTH AFRICAN COMPANY (IES)

SHAREHOLDERS OF THE SOUTH AFRICAN PRODUCTION COMPANY (IES)					
Legal name (individual, corporation, partnership or sole proprietorship)	% of shares held	Gender	Race	Nationality	South African ID or Passport number

DIRECTORS AND OFFICERS OF THE SOUTH AFRICAN PRODUCTION COMPANY (IES)					
Last Name	First Name	Designation	Gender	Race	South Africa ID or Passport Number



HOW MANY PERMANENT EMPLOYEES IN THE PRODUCTION COMPANY (IES) (FOR STATISTICAL PURPOSE)					
Position held	Number	Black		White	
		Male	Female	Male	Female
Executive Management					
Senior Management					
Creative Staff					
Technical Staff					
Administrative Staff					

AUDITORS FOR SOUTH AFRICAN PRODUCTION COMPANY (IES)				
Name	Address	City	Postal Code	Telephone

LEGAL COUNSEL FOR SOUTH AFRICAN PRODUCTION COMPANY (IES)				
Name	Address	City	Postal Code	Telephone



FINANCIAL INSTITUTION WHERE SOUTH AFRICAN PRODUCTION COMPANY (IES) BANK				
Name	Branch	Account Number	Telephone	Contact Person

LEGAL COUNCEL FOR FOREIGN PRODUCTION COMPANY (IES)				
Name	Address	City	Postal Code	Telephone

AUDITORS FOR FOREIGN PRODUCTION COMPANY (IES)				
Name	Address	City	Postal Code	Telephone



FINANCIAL INSTITUTION WHERE THE FOREIGN COMPANY (IES) BANK				
Name	Branch	Account Number	Telephone	Contact Person



IN ADDITION TO THIS APPLICATION FORM, THE NFVF REQUIRES OTHER DOCUMENTS TO COMPLETE ITS ASSESSMENT OF YOUR APPLICATION. PLEASE TICK THE LEFT HAND COLUMN BELOW TO CONFIRM THAT THE RELEVANT DOCUMENT HAS BEEN SUBMITTED.

<input type="checkbox"/>	Application Form	
<input type="checkbox"/>	Documents required in the Advance Ruling letter (if any)	
<input type="checkbox"/>	Audited production cost report, prepared by a certified accountant independent of the production company	
<input type="checkbox"/>	Final financial structure showing any variance from the original financial structure submitted at the Advance Ruling stage (in Rand) accompanied by all of the South African co-producer's related contracts	
<input type="checkbox"/>	Final itemized breakdown of costs by country (in relevant currencies)	
<input type="checkbox"/>	Final cost report (in Rand) approved by the foreign co-producer	
<input type="checkbox"/>	Complete list of head and tail credits giving the nationality of each participant. This list must be approved and signed by the co-producer. In the case series, the South African co-producer must provide and signed and approved the list of credits for the first and last episodes, as well as a list of any credits that differ in other episodes	
<input type="checkbox"/>	Video cassette (3 or 4 cassettes in the case of a television series)	



The Co-production department may ask for other documents, which are deemed necessary to assess the application.

The NFVF reserves the right to request any document that is directly or indirectly pertinent to the assessment necessary to determine the eligibility of the South African producer(s) and the project. Please be advised that during the review of your project, the Applicant may be required to provide additional documentation.

NFVF retains the right to keep on file all written material submitted by the applicant in support of an application.

NFVF is subject to the Promotion of Access to Information Act, No.2 of 2000 but all confidential company information will remain confident.

SOUTH AFRICAN PRODUCER STATEMENTS

The undersigned authorized representative of the Applicant

- authorizes the NFVF to discuss the application with the NFVF auditor(s), legal counsel, actual or proposed financier(s) and financier(s), representative(s) of foreign authorities and any other person(s) or entity(ies) connected with the application or project
- authorizes the NFVF or its authorized representative(s) to perform audits of the project,
- declares that the South African producer has not entered into any oral or written agreement or side deal that conflicts with any of the provisions of this application
- has made and shall make full disclosure to the NFVF of any potential litigation that is likely to jeopardize the project or be detrimental to the project, declares that the information provided herein and attached is accurate and complete, and that the project complies and will continue to comply with South African laws.



SOUTH AFRICAN APPLICANT

Last Name	First Name	Signature	Year / Month / Day Date

COMPANY STAMP (if available)