



Motion Picture Studio Production Technicians
Local 849 of the I.A.T.S.E.

NEW SHOW INFORMATION

Please complete all sections to the best of your abilities at this time.
If you have any questions, please contact our Business Agent, Shelley Bibby - busagent@iatse849.com

Production Name:
Production Company Name:
Parent Company/Broadcaster:
Mailing Address:
Contact Phone Number:
Who will sign the Collective Agreement and/or Corporate Guarantee and position:

Show Type:	Feature <input type="checkbox"/>	Series <input type="checkbox"/>	MOW <input type="checkbox"/>	SVOD Series <input type="checkbox"/>	SVOD Feature <input type="checkbox"/>
Tier to be Requested:	Tier 1 <input type="checkbox"/>	Tier 2 <input type="checkbox"/>	Tier 3 <input type="checkbox"/>	Tier 4 <input type="checkbox"/>	Tier 5 <input type="checkbox"/>
Will you be requesting the First Season Incentive?	YES <input type="checkbox"/>	NO <input type="checkbox"/>			
Budget (Per Episode, if applicable):					
Number of Episodes:			Length of Each Episode:		
Payroll Company:					
Area of Production/Locations:					
Producer:			Production Manager:		
Prep Dates:			Shoot Dates:		
Wrap Date:			Number of Shoot Days:		

Additional Comments:

Please forward completed form to: busagent@iatse849.com
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