



**Stunt Questionnaire**

1. Policy Holder Information (if applicable)

Insured name	
Policy number:	

2. Production Details

Production Title:			
Production Type:			
a) If Music Video, please indicate artist's name:		Music genre:	
Total Production Budget:	\$		
Production Dates:	to	Total number of days:	
Filming Location:			
Please provide a detailed synopsis of the shoot:			

3. Production Personnel

Producer's or EP's name:			
Phone number:			
e-mail address:			
Driver's License number:		State:	

4. Stunt Coordinator

Are you using a Stunt Coordinator?	Yes	No
If yes, please provide name and contact info, if available:		
Stunt Coordinator Name:	Email:	
Phone Number:	IMDB Link:	

5. Aerial Scenes

Shoot From:	Commercial Airline	Other Jet Aircraft	Private Plane	Propeller Plane
	Helicopter (equipment <500,000)	Helicopter (equipment >500,000 <1,000,000)		
	Helicopter (equipment >1,000,000)	Hanglider	Parachute	Hot Air Balloon
Detailed description of aerial scene(s):				
Number of scenes which involve aerial photography:				
Dates of aerial shoot:	to	Total number of dates:		

6. Falls

Fall from above 3'	Fall from 3' or less
Detailed description of scene(s):	
Number of scenes which involve a fall:	
Dates on which fall(s) will be filmed:	to Total number of days:

7. Fight Scenes

No physical contact	physical contact (no weapons)	physical contact (weapons)
Detailed description of scene(s):		
Number of scenes which involve a fight:		
Dates on which fight(s) will be filmed:	to	Total number of days:

### 8. Fireworks

Please select one of the following:			
Minimal Risk Effect (Minimal risk effect will be 100% controlled, at least 500 feet away from the public and property. A permit from the fire department is not required. Actors and crew will not be near the effect. Licensed pyrotechnician is not required.)			
Minimal Risk Effect with COI from Pyrotechnician (A certificate of insurance is obtained from the pyrotechnician naming the Production company as additional insured [and loss Payee if you have equipment coverage]).			
Moderate Risk Effect (Moderate risk effect will be 100% controlled, at least 250 feet away from the public and property. A permit from the fire department is not required. Actors and/or crew may be near the effect. Licensed pyrotechnician is not required. Loss control and safety features must be provided.)			
Medium Risk Effect (Medium risk effect will be 100% controlled, at least 100 feet away from the public and property. A permit is obtained from the fire department and the fire department will be present. Actors and/or crew may be near the effect. Licensed pyrotechnician is required to be present. Loss control and safety features must be provided.)			
High Risk Effect (High risk effect is 100% controlled and takes place close to the public and/or property. A permit must be obtained and the fire department and the fire department will be present. Actors and/or crew may be near the effect. Licensed pyrotechnician is required to be present. Loss control and safety features must be provided.)			
Detailed description of scene(s):			
Number of Firework effects:			
Number of scenes which involve fireworks:			
Dates on which fireworks will be filmed:	to	Total number of days:	

### 9. Flashboxes/Flashpods

Detailed description of scene:			
Number of scenes which involve flashboxes:			
Number of flashbox effects:			
Dates on which flashboxes will be filmed:	to	Total number of days:	

### 10. Pyrotechnics

Please select one of the following:			
Minimal Risk Effect (100% controlled effect in a small contained area. Minimal, if any, chance for injury or damage to property. Permitting not required. Fire department presence not required. Safety precautions must be provided. Certificate of insurance not obtained from pyrotechnician.)			
Minimal Risk Effect with COI from Pyrotechnician (A certificate of insurance is obtained from the pyrotechnician naming the production company as additional insured f and loss payee if you have equipment coverage]).			
Moderate Risk Effect (Highly controlled effect in a small, contained area. Permit obtained from fire department but fire department presence during effect is not required. Safety precautions must be provided. Certificate of insurance not obtained from pyro.)			
Medium Risk Effect (Permit obtained from fire department and fire department will be present during effect. Safety precautions must be provided. Certificate of insurance not obtained from pyrotechnician.)			
High Risk Effect (Major effect. Permit obtained from fire department and fire department will be present during effect. Safety precautions must be provided. Certificate of insurance not obtained from stunt coordinator.)			
Detailed description of scene(s):			
Number of pyrotechnic effects:			
Number of scenes which involve pyrotechnics:			
Dates on which pyrotechnics will be filmed:	to	Total number of days:	

### 11. Demolitions/Explosions

Please select one of the following:			
Minimal Risk Effect (100% controlled effect in a small contained area. Minimal, if any, chance for injury or damage to property. Permitting not required. Fire department presence not required. Safety precautions must be provided. Certificate of insurance not obtained from stunt coordinator.)			
Minimal Risk Effect with COI from Pyrotechnician (A certificate of insurance is obtained from the pyrotechnician naming the production company as additional insured [and loss payee if you have equipment coverage]).			
Moderate Risk Effect (Highly controlled effect in a small contained area. Permit obtained from fire department but fire department presence during effect is not required. Safety precautions must be provided. Certificate of insurance not obtained from stunt coordinator.)			
Medium Risk Effect (Medium risk effect. Permit obtained from fire department and fire department will be present during effect. Safety precautions must be provided. Certificate of insurance not obtained from stunt coordinator.)			
High Risk Effect (Major effect. Permit obtained from fire department and fire department will be present during effect. Safety precautions must be provided. Certificate of insurance not obtained from stunt coordinator.)			
Detailed description of scene(s):			
Number of demolition/explosion effects:			
Number of scenes which involve demolitions/explosions:			
Dates on which demolitions/explosions will be filmed:	to	Total number of days:	

12. Recreational Vehicles

Recreational Vehicle Type:	ATV	Go Cart	Moped	Scooter	Segway	Motorcycle	Snowmobile
Detailed Description of scene:							
Number of scenes which involve recreational vehicles:							
Number of recreational vehicles:							
Dates on which RVs will be filmed:	to			Total number of days:			

13. Water Scenes

canoes	close to shore shoot	inland lakes	kayaks	surfing	swimming pools	
Detailed description of scene(s):						
Number of scenes which involve water shooting:						
Dates on which water scene(s) will be filmed:	to			Total number of days:		

14. Weapons

Weapon type:	Prop guns	Blanks	Squibs	Knives	
Detailed description of scene(s):					
Number of scenes which involve weapons:					
Dates on which weapon(s) will be filmed:	to			Total number of days:	

\*Prop guns are guns that discharge other than squibs or blanks. Note that guns unable to fire may not be considered as hazardous activity but underwriters require disclosure.

15. Driving & Vehicle Effects

Which of the following precision driving scenes are involved in this production?		
Public Road Driving	Race Track Driving	Off-Road Driving
Detailed description of scenes:		
Number of scenes which involve precision driving:		
Number of Cars:		
Dates on which driving will be filmed:	to	Total number of days:

16. Animals

Which type of animal is involved in this production (if it's a dog, please be specific about the breed)?			
Detailed description of scene:			
Number of scenes which involve the animal:			
Number of animals:			
Dates on which animal(s) will be filmed:	to	Total number of days:	

17. Other

Do you have any other stunt activities that are not listed above?	Yes	No
If yes, please provide details:		

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Signature (please type first and last name.)

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Title

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Date (mm/dd/yyyy)