

# Production Insurance Wrap-Up Program



## UK Production Handbook



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## Production Handbook

### Overview

Discovery Networks International maintains a Production Insurance Program (“The Program”) that satisfies all of Discovery’s insurance requirements with the exception of Owned Automobile coverage and any local compulsory foreign coverage(s) which is the responsibility of the production company. The Program is administered by Discovery’s insurance broker, Aon Sports, Recreation, and Entertainment.

#### Process

In order to activate coverage under the Program, the production company must complete and submit an application for insurance to Aon. Upon satisfactory review of the completed application, Aon will send a premium invoice to the production company for payment. Aon will send the production company a summary of insurance evidencing coverage under the Program.

#### Higher-hazards and Special Risk Coverage

You must advise Aon in writing, of any special risks associated with your project. This includes but is not limited to: stunts, pyrotechnics, firearms, precision driving, aircraft, drones, watercraft, railroads, foreign activities, animals, or any unusual or hazardous exposures and/or conditions involving either cast or crew. The production company is responsible for the payment of any premium(s) associated with Special Risk coverage (if required).

Political Risk and Kidnap & Ransom Insurance are **NOT** provided under this insurance program. Political risk insurance includes coverage for extra expenses incurred by production as the result of government confiscation of assets, political violence, including acts of civil unrest or insurrection, as well as acts of war. Kidnap & Ransom Insurance indemnifies production for monies paid to kidnappers or extortionists, loss of ransom in transit, and other expenses incurred as a result of a kidnapping incident. If you are interested in either of these coverage(s) please reach out to your Aon Service Team.

#### Cost

The total cost to utilize the Program is the Composite Rate of 0.69%. multiplied by Net Insurable Production Costs (NIPC). For example, if a production’s NIPC is £500,000, the premium would be £3,450 (0.69%. multiplied by £500,000).

Foreign Unit Travel Insurance or “FUTI” (cover details on page 10) is required whether you are filming inside or outside your country of domesticity. The rates are 0.05% for in country and 0.1144% for external travel. If there are any high-risk activities, more than 4 crew on a helicopter, or higher limits needed, an additional premium may apply.

Non-Owned Contingent Aircraft/Drone Liability rates are as follows as long as all requirements have been met (outlined on page 23 for Aircraft & page 25 for Drones). Any special or unusual hazards involving aircraft may result in higher premium(s).

#### Drones

- 1-5 days of filming - \$500 USD
- 6-10 days of filming - \$750 USD



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### **Aircraft**

- \$1,000 USD for any use

Please note rates do not include UK or local country issuance taxes, nor any specialty coverages you may need which may result in a premium which will be in addition to the total cost(s) previously referenced.

Net Insurable Production Costs are defined as the budget, less production fee (if any), less insurance cost (if any), less agency fee (if any) and less contingency (if any). Please note that special risk coverage(s) may result in a premium which will be in addition to the total cost previously referenced.

### *If you have a claim*

Immediately notify Aon, in writing, of any claims, threats of claims, suits, damage to property or any other loss. To ensure timely settlement of your claim, you must provide all necessary documentation in support of your claim(s) on a timely basis. You must also cooperate with and permit Aon and its insurance carriers to conduct the investigation and defense of your claims, suits or losses. Please note that the production company is responsible for any deductible(s) associated with the Program.

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# At Your Service Directory

## Aon Sports, Recreation, and Entertainment – UK

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### Production & Public Liability Claims

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Claims Manager

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### Aon/Albert G. Ruben Company of New York

**Please contact the UK or U.S. Team for any coverage advise or placement inquiries for productions that will film in North America.**

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**Maria Clark**

Claims Manager

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Account Executive

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**Christian Aguilar**

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Aon Global Contacts

Country	Aon Contact First Name	Aon Contact Last Name	Email	Phone (Office)	Phone (Mobile)	Address
Australia	James	Schubach	<a href="mailto:James.b.schubach@aon.com">James.b.schubach@aon.com</a>	+61 2 8623 4253	+61 (0) 466 462384	Level 1, 130 George Street; Parramatta NSW 2150
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## Production Handbook

Country	Aon Contact First Name	Aon Contact Last Name	Email	Phone (Office)	Phone (Mobile)	Address
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India	Nancy	Goyal	<a href="mailto:Nancy.goyal@anviti.in">Nancy.goyal@anviti.in</a>	+91 1244921231	+91 8744954526	Anviti Insurance Brokers Pvt. Ltd. 17th Floor, Tower A, DLF Building No. 5, DLF Phase III, Cyber City, Gurugram -122002
India	Vinay	Kumar	<a href="mailto:vinay.kumar@anviti.in">vinay.kumar@anviti.in</a>	+91 80 4611 3699	+91 99 86077551	Anviti Insurance Brokers Pvt. Ltd. A Catamaran Company Unit 102, 1st Floor, The Estate, #121, Dickenson Road, Bengaluru - 560042
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## Production Handbook

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## Program Insurance Coverage

This is an illustration only of the coverage under the Production Insurance Wrap-Up Program. This insurance document is furnished as a matter of information for your convenience. It only summarizes the listed policy(ies) and is not intended to reflect all the terms and conditions or exclusions of such policy(ies). Moreover, the information contained in this document reflects coverage as of the date of this summary as shown below of the policy(ies) and does not include subsequent changes. This document is not an insurance policy and does not amend, alter or extend the coverage afforded by the listed policy(ies). The insurance afforded by the listed policy(ies) is subject to all the terms, exclusions and conditions of such policy(ies).

### PRODUCTION PACKAGE

TYPE OF COVER	LIMIT	Excess Each Claim
<b>PRODUCERS INDEMNITY</b>	£500,000	£25,000
<b>CAST:</b>	Net Insurable Production Budget Up to £10,000,000	£5,000
Undeclared Cast	£100,000	£5,000
Disgrace	£500,000	£15,000
Family Bereavement	£1,000,000	£5,000
Kidnap Including Ransom	£1,000,000	£5,000
<b>NEGATIVE FILM &amp; FAULTY STOCK:</b>	Net Insurable Production Budget Up to £10,000,000	£5,000
Operator Error	£500,000	£5,000
<b>EXTRA EXPENSE:</b>	£3,000,000	£5,000 (Named Storm Special Deductible 10% of loss, subject to \$25,000 minimum)
Civil Authority	£500,000	£5,000
Ingress/Egress	Included in 'Extra Expense'	£5,000
Imminent Peril	Included in 'Extra Expense'	£5,000
Power Interruption	Included in 'Extra Expense'	£5,000
Strike	£250,000	£5,000
Crisis Event	£250,000	£5,000
<b>MISCELLANEOUS PROPERTY</b>	£3,000,000	£1,500
<b>PROPS/SETS/WARDROBE</b>	£3,000,000	£1,500
<b>LIBRARY STOCK</b>	£250,000	£5,000
<b>UNMANNED AERIAL VEHICLE (PHYSICAL DAMAGE)</b>	£50,000	£1,000
<b>WATERCRAFT (PHYSICAL DAMAGE)</b>	£250,000	£1,000
<b>MONEY &amp; CURRENCY</b>	£250,000	£1,000
<b>FINE ART</b>	£250,000	£1,500
<b>VEHICLE PHYSICAL DAMAGE</b>	£1,000,000	£2,500
<b>THIRD PARTY PROPERTY DAMAGE</b>	£5,000,000	£1,500
<b>OFFICE EQUIPMENT AND FURNISHING</b>	£250,000	£1,000
<b>ANIMAL MORTALITY PER OCCURRENCE</b>	£250,000	£1,500
<b>CLAIMS PREPARATION EXPENSES</b>	£5,000	NIL

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DELIVERY DATE EXPENSES	£250,000	£5,000
PRINT & ADVERTISING EXPENSES	£250,000	£5,000
PUBLIC RELATIONS EXPENSES	£250,000	£5,000

**Important Note: Terrorism is specifically excluded on this policy. If you are interested in obtaining a quote for coverage, please reach out to your Aon Service Team**

**\*Cast members need to be declared for coverage to apply; coverage is subject to underwriting approval\***

### UK LIABILITY

	<u>Limit of Liability</u>	<u>Deductible</u>
Public / Products Liability	£10,000,000	£500

**\*Important Note: Terrorism is specifically excluded on this Public/Products Liability policy. If you are interested in obtaining coverage, please reach out to your Aon Service Team\***

UK Employers Liability	£10,000,000	Nil
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**\*Important Note: Terrorism is sub-limited to £5,000,000 Any one Occurrence**

**\*Please note local admitted Employers Liability outside of the UK is not covered under the Production Insurance Wrap-Up Program and is the responsibility of the Production Company\***

### ERRORS & OMISSIONS

	<u>Limit of Liability</u>	<u>Deductible</u> (Per Claim)
Each Claim	\$1,000,000 USD	\$25,000 USD
Aggregate	\$3,000,000 USD	

### NON-OWNED CONTINGENT AIRCRAFT LIABILITY

	<u>Limit of Liability</u>	<u>Deductible</u>
Bodily Injury/Property Damage Combined Single Limit Per Occurrence	\$5,000,000 USD	None

**FOREIGN UNIT TRAVEL INSURANCE (FUTI)**

\*The limits showing below will be in the same currency as the declared budget\*

<b>Maximum Incident Limit</b>		
The liability of the <b>Insurer</b> under this Policy in respect of any one <b>Incident</b> shall not exceed the <b>Maximum Incident Limit</b> of 25,000,000 subject to the following inner limits (the lowest of which shall apply if both are triggered):		
<b>Aircraft Accumulation</b>	Multi Engined Aircraft	10,000,000
	Single Engined Aircraft	1,000,000
<b>Incident due to War whilst on an External Journey</b>		10,000,000

**Personal Accident Insurance - Cover A – Benefits and Sums Insured**

Benefit	Category of Insured Persons	
	A	B
	Sum Insured	
<b>1. Death</b>	250,000	250,000
<b>2. Permanent Partial Disablement</b>	250,000	250,000
<b>3. Permanent Total Disablement</b>	250,000	250,000
<b>4. Temporary Total Disablement</b>	1,000 or 1/52 <b>Annual Salary</b> whichever is lesser	1,000 or 1/52 <b>Annual Salary</b> whichever is lesser
<b>Payment Period</b>	104 weeks	104 weeks
<b>Deferment Period</b>	7 days	7 days
Benefit 4 is payable per week & not necessarily consecutive		

### Illness or disease Insurance – Cover B – Benefits and Sums Insured

Benefit	Category of Insured Persons	
	A	B
	Sum Insured	
5. Permanent Total Disablement	250,000	250,000
6. Temporary Total Disablement	1,000 or 1/52 <b>Annual Salary</b> whichever is lesser	1,000 or 1/52 <b>Annual Salary</b> whichever is lesser
Payment Period	52 weeks	52 weeks
Deferment Period	7 days	7 days
Benefit 6 is payable per week & not necessarily consecutive		

### Personal Accident and Sickness Insurance – Limits per Insured Person

Limit per Person	
If the Personal Accident or Sickness Benefits are expressed as a multiple of <b>Annual Salary</b> the maximum benefit for any one <b>Insured Person</b> shall not exceed	
1. Death	250,000
2. Permanent Partial Disablement	250,000
3. Permanent Total Disablement	250,000
4. Temporary Total Disablement	1,000
5. Permanent Total Disablement	250,000
6. Temporary Total Disablement	1,000 or 1/52 Annual Salary whichever is lesser

## Travel Insurance – Benefits and Sums Insured

Section (Special Extensions only operate where full cover for the section has been purchased)	Limit of Indemnity or Sum Insured
<p><b>Medical Repatriation and Emergency Travel Expenses Insurance</b></p> <p>Special Extensions:</p> <p><b>Foreign Hospitalisation</b></p> <p><b>Funeral Expenses</b></p> <p><b>Repatriation of Household Goods</b></p> <p><b>Search and Rescue Costs</b></p>	<p>Unlimited</p> <p>50 per full 24 hours up to a maximum of 36,400</p> <p>up to a maximum of 10,000 any one <b>Insured Person</b></p> <p>up to a maximum of 2,000 any one <b>Insured Person</b></p> <p>up to a maximum of 50,000 any one <b>Insured Person</b></p>
<p><b>Travel Disruption Insurance</b></p> <p>Special Extensions:</p> <p><b>Travel Delay</b></p> <p>Incident Limit</p>	<p>Up to 10,000 per <b>Insured Person</b> subject to the Incident Limit</p> <p>50 after the first 4 consecutive hours and an additional 50 for each subsequent hour delayed up to a maximum of 1,000 in respect of any one <b>Insured Person</b></p> <p>a maximum of 250,000 in respect of all losses arising from either the same <b>Incident</b> or arising in any one <b>Period of Insurance</b></p>
<p><b>Evacuation Insurance</b></p> <p>Special Extensions:</p> <p><b>Trauma Risk Management Counselling</b></p> <p>Incident Limit:</p>	<p>Up to 10,000 any one <b>Insured Person</b> subject to the Incident Limit</p> <p>up to 5,000 any one <b>Incident</b></p> <p>a maximum of 250,000 in respect of all losses arising from either the same Incident or arising in any one <b>Period of Insurance</b></p>

### Travel Insurance – Benefits and Sums Insured Continued

<b>Section</b> (Special Extensions only operate where full cover for the section has been purchased)	Limit of Indemnity or Sum Insured
<b>Personal Baggage and Business Equipment Insurance</b>  Single Article Limit:  Special Extensions:  <b>Business Equipment</b>  <b>Delayed Baggage</b>  <b>Loss of Keys</b>  <b>Travel Documents</b>	up to a maximum of 10,000 any one <b>Insured Person</b>  3,000 or the Sum Insured whichever is the lesser  up to a maximum of 3,000 any one <b>Insured Person</b>  up to a maximum of 2,000 any one <b>Insured Person</b>  up to a maximum of 500 any one <b>Insured Person</b>  up to a maximum of 2,000 any one <b>Insured Person</b>
<b>Personal Money and Financial Card Misuse Insurance</b>  Cash Limit  Special Extensions:  <b>Emergency Cash</b>	up to a maximum of 10,000 any one <b>Insured Person</b>  3,000 or the Sum Insured whichever is the lesser in respect of coin bank and currency notes  up to 1,000 any one <b>Insured Person</b>
<b>Hijack Kidnap &amp; Extortion Insurance</b>  A. <b>Kidnap or Extortion Consultant's Costs</b>  B. <b>Kidnap or Extortion Expenses</b>  C. <b>Kidnap or Extortion Payment</b>  D. <b>Hijack or Kidnap Benefit</b>  Special Extensions:  <b>Express Kidnappings</b>  Incident Limit:	50,000 any one <b>Insured Person</b> subject to the Incident Limit  250,000 any one <b>Insured Person</b> subject to the Incident Limit  Included in B. above  500 per day per <b>Insured Person</b> subject to a maximum of 50,000  up to a maximum of 1,000 any one <b>Insured Person</b>  a maximum of 350,000 in respect of all losses arising from either the same <b>Incident</b> or arising in any one <b>Period of Insurance</b>
<b>Legal Expenses Insurance</b>	up to a maximum of 50,000 any one Insured Person
<b>Personal Liability Insurance</b>	up to a maximum of 5,000,000 any one Insured Person

<p><b>Personal Security Specialist Expenses Insurance Section</b></p> <p>Incident Limit:</p>	<p>up to 10,000 per Insured Person subject to the Incident Limit</p> <p>a maximum of 25,000 in respect of all losses arising from either the same <b>Incident</b> or arising in any one <b>Period of Insurance</b></p>
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**Global Risk Monitor – Drum Cussac Security Specialists**

Before departing on a trip, travellers will be provided with pre-travel advice and information to keep them updated with the current situation in the countries and locations they are travelling to. Throughout their journey and in-country stay, travellers will then receive updates should the threat level change, along with automated alert to any risks that may disrupt their travel plans or affect their personal safety

Please complete a short registration form in order to sign up to the GRM online platform.

<https://www.drum-cussac.net/self-registration>

<https://travelprepare.drum-cussac.net/login/self-registration.php>





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### **WATERCRAFT LIABILITY AND/OR WEATHER INSURANCE**

\*These coverages are NOT included in the Production Insurance Wrap-Up Program. Please advise your Aon UK Service Team if you are interested in obtaining a quote for either of these coverages which will be subject to an additional premium.\*

## Summary of Coverage

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### Summary of Coverage

*This insurance document is furnished to you as a matter of information for your convenience. It only summarizes the listed policy(ies) and is not intended to reflect all the terms and conditions or exclusions of such policy(ies). Moreover, the information contained in this document reflects coverage as of the date of this summary as shown below of the policy(ies) and does not include subsequent changes. This document is not an insurance policy and does not amend, alter or extend the coverage afforded by the listed policy(ies). The insurance afforded by the listed policy(ies) is subject to all the terms, exclusions and conditions of such policy(ies).*

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### Production Package Policy

Extra Expense	Reimburses the production company for the extra out-of-pocket costs incurred in completing principal photography, due to the interruption, postponement or cancellation of the production, as a direct result of damage to or destruction of property or facilities used in connection with the production. Also includes Civil Authority, Imminent Peril, Strike and Crisis Event Coverage.
Cast Insurance	Reimburses you for the extra out-of-pocket costs incurred in completing principal photography, as a direct result of a scheduled artist being unable to commence, continue or complete their duties due to death, injury or sickness, subject to certain exclusions. Includes a sublimit for Bereavement Coverage.
Negative Film and Videotape	Reimburses you for loss, damage to, destruction of raw film, tape stock, exposed film (developed or undeveloped), videotape, working prints, soundtracks, and tapes.
Faulty Stock, Camera or Processing	Reimburses costs to re-shoot or correct any portion of the production because of damage caused by faulty raw stock, faulty camera, or faulty processing by the lab.
Props, Sets and Wardrobe	Covers props, scenery, and costumes for which the production is legally liable against "all risks" of direct physical loss or damage. Antiques, objects of art, watches, precious stones, and similar high value items are subject to a sublimit.
Third Party Property Damage	Pays for damage to the property of others while it is in the care, custody, or control of the production company.
Miscellaneous Equipment	Provides replacement cost or actual cash value to repair lost, damaged or destroyed equipment, including cameras and camera-related equipment, sound and lighting equipment, electrical and mechanical special effects equipment, and editing equipment.
Temporary Production Office Contents	Covers loss, damage or destruction of Business Personal Property usual to the insured operations.
Money and Securities	Insures cash and securities used in the course of production against the perils of Burglary, Robbery, or Fire.
Jewelry and Fine Arts	Insures antiques, objects of art, watches, precious stones and similar items
Animal Mortality	Reimburses the owner of a declared and insured animal for death or illness of the animal.
Hired and Non-Owned Auto Physical Damage	Reimburses the owner for damage done to a hired or rented vehicle used in production for which the production company is legally liable.

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**Public Liability**

The policy provides defense and indemnity resulting from bodily injury and/or property damage that arises from an occurrence connected with your production activities.

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**Errors & Omissions**

Provides coverage and defense against lawsuits alleging unauthorized use of titles, format, ideas, characters, plots, plagiarism, unfair competition, slander, libel, defamation of character and/or invasion of privacy.

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**UK Employers Liability**

Provides indemnity in respect to your legal liability to pay compensation for any employee who is injured in the course of their employment with you

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**Foreign Unit Travel Insurance (FUTI)**

Provides personal accident and travel cover for anyone working in connection with the production.

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**Non-Owned Contingent Aircraft Liability**

The policy provides defense and indemnity resulting from bodily injury and/or property damage that arises from an occurrence connected with the use of non-owned aircraft (including drones) on your production. This coverage is NOT automatic and is subject to an additional premium.

## Motor Insurance

### I. Picture Vehicles

#### Shoots inside the UK

The UK Production Package policy provides Physical Damage coverage for on-camera picture vehicles. This coverage is on a worldwide basis and would include coverage for shoots outside of the UK.

As respects UK Auto Liability for on camera picture vehicles while being driven on public highways/roads where the UK Road Traffic Act applies, the production will need to take out UK Auto Liability with Amlin. Amlin will quote this separately and the vehicles must be UK registered. Coverage would extend to any Liability arising in European locations provided vehicles are UK registered. The charge is £75 + Tax for static scenes and £150 + tax for moving per vehicle.

**\*Please notify your Aon Service Team at least 24 hours in advance if UK Auto Liability will be required\***

If the shoot is on private property, the Public Liability policy covers the liability.

#### Shoots outside the UK

As respects liability for shoots outside the UK, production will need to secure local Automobile Liability including Physical Damage coverage in that country.

#### Shoots in the U.S.

As respects liability for shoots in the U.S., Automobile Liability can be included under the U.S. Hired/Non-Owned Automobile Liability policy. Auto Physical Damage coverage, however, should be secured with the auto rental company.

### II. Rental Vehicles

#### Shoots inside the UK

For any UK rental vehicles used purely for Production transportation purposes and not being used on camera, the Auto physical damage and Liability Insurance must be secured with the auto rental company in the UK.

### Shoots outside the UK

Any rental vehicles used purely for Production transportation purposes and not being used on camera for shoots outside of the UK, must be secured with the auto rental company in that respective country and must comply with local laws and regulations.

### Shoots in the U.S.

As respects liability for shoots in the U.S., Automobile Liability can be included under the U.S. Hired/Non-Owned Automobile Liability policy. Auto Physical Damage coverage, however, should be secured with the auto rental company.

**Please note Owned Automobile Insurance is not covered under the Production Insurance Wrap-Up Program and is the responsibility of the Production Company. Should you have any questions about these coverages, please discuss with your Aon Service Team.**



## Accidental Death & Dismemberment (AD&D)

### U.S. Talent & U.S. Crew ONLY

**This coverage is NOT automatic. Please follow up with your AON Service Team if you would like to obtain a quote for Accidental Death & Dismemberment coverage. The information the insurer will require in order to quote is as follows:**

How many individuals are to be quoted for coverage?  
Where are the individuals leaving from/going to?  
What are the activities they will perform?  
What period of time will they need this coverage?

**Limits:**

**Class 1 - Talent:**

**AD&D SUM INSURED:** \$1,000,000 (*Per Person*)

**ACCIDENT MEDICAL EXPENSE SUM INSURED:** \$250,000 (*Per Person*)\*

\*Emergency Sickness Coverage is limited to \$100,000 (*Per Person*)

**TRAVEL ASSISTANCE SERVICES INCLUDED**  
EMERGENCY MEDICAL EVACUATION \$500,000  
REPATRIATION OF REMAINS \$500,000

**Class 2 - Crew:**

**AD&D SUM INSURED:** \$350,000 (*Per Person*)

**ACCIDENT MEDICAL EXPENSE SUM INSURED:** \$250,000 (*Per Person*)\*

\*Emergency Sickness Coverage is limited to \$100,000 (*Per Person*)

**TRAVEL ASSISTANCE SERVICES INCLUDED:**  
EMERGENCY MEDICAL EVACUATION \$250,000  
REPATRIATION OF REMAINS \$250,000

\*This policy has a per accident aggregate limit of \$10,000,000

## Production and Errors & Omissions Insurance Application & Clearance Procedures

**The following six (6) page application must be completed in its entirety. In addition, to complete your application, please submit the following:**

- Production Budget
- Title Report with legal opinion
- Special Coverage Checklist
- Treatment (in English preferably)
- Your evidence of Employer's Liability/Workers' Compensation coverage (Certificate of Insurance)

Aon Sports, Recreation, and Entertainment  
Attn: Matt Stoodley  
The Aon Centre, The Leadenhall Building  
122 Leadenhall Street | London | EC3V 4AN

Phone: +44 (0) 1245 706079  
Mobile: +44 (0) 7767 703531  
Email: [Matt.Stoodley@aon.co.uk](mailto:Matt.Stoodley@aon.co.uk)

## Special Coverage Checklist

Each Production Company must complete the **Special Coverage Checklist** attached as Exhibit B for each production declared to the Discovery Production Insurance Wrap-Up Program.

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- The Insurance program does not automatically cover production operations that involve hazardous and/or unusual production operations. If your production involves any of these activities complete the appropriate questionnaire and contact your account service team member at least five business days prior to the scheduled activity. Please provide us with all information in a timely manner to allow us to review and secure the appropriate coverage.
- Essential Cast Member or Director
- Use of wild animals or horses
- Stunts
- Racing/race cars and or precision driving
- Watercraft
- Aircraft
- Unmanned aerial vehicles ("Drones")
- Railroads
- Pyrotechnics
- Firearms
- Minors
- Outdoor locations requiring Weather Insurance
- Production activities outside of the EU

(See the following special coverage questionnaires, complete and return any that apply)

Please be sure to read and understand the insurance requirements and indemnity obligations of every contract prior to your executing same including location, equipment and vehicle rental agreements.

Contact your Aon Account Service Team to assist in reviewing contractual insurance requirements to be sure that the insurance program is providing you with the proper and appropriate coverage or if you have any questions or concerns.

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## Production Handbook

# Special Coverage Checklist

Date
Production Co.
Network
Title of Production

Description	Yes	No	
1. Aircraft (Helicopter or Fixed Wing-Scouting or Filming)	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
2. Unmanned Aerial Vehicles ("Drones")	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
3. Animals	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
4. Auto (Stunt Driving and/or Precision Driving)	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
5. Cast Insurance (Irreplaceable Talent &/or Director):	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
6. Fine Arts/Jewelry/Fur in excess of \$250,000	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
7. Firearms			
8. Foreign Locations *	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
9. Pyrotechnics	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
10. Railroad Locations	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
11. Stunts/Hazardous Activities	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
12. Watercraft	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
13. Weather Insurance	<input type="checkbox"/>	<input type="checkbox"/>	If Yes, complete attached questionnaire
14. Is your production company based outside the European Union? <input type="checkbox"/> <input type="checkbox"/>			
15. Will you be filming in the United States or Canada?	<input type="checkbox"/>	<input type="checkbox"/>	
16. Are there any children working on this production?	<input type="checkbox"/>	<input type="checkbox"/>	
17. Does this show involve any home or garden renovations?	<input type="checkbox"/>	<input type="checkbox"/>	
18. Are there any other special or unusual situations associated with the job? If yes, please explain:			
19. Are there any other special or unusual situations associated with the job? If yes, please explain:			
20. Employer Reference Number (ERN): _____ (compulsory for Employers' Liability cover, but only applicable for UK domiciled companies)			
21. Are you hiring Union labor for this show?	<input type="checkbox"/>	<input type="checkbox"/>	
Production Manager	E-mail		
Cell Phone #			
Cell Phone #			

**\*Please contact your Aon account service team if you plan to film in any country the UK Foreign Commonwealth Office (FCO) or the EU local equivalent advises against travel to.**

## Special Coverage Questionnaires

If any question on Exhibit B is answered “Yes” you must complete the related questionnaire that is applicable to such Special Coverage.

NO INSURANCE coverage is afforded for such activity until:

- Your Aon account service team has reviewed the questionnaire
- You have provided us with any and all additional underwriting information as may be required
- Paid any additional premium for such required additional coverage

If for any reason you are unsure of whether or not a specific situation may be covered by the Insurance Program please contact your Aon account service team. We are always here to assist you.



## Production Handbook

# Aircraft Questionnaire

Renting, hiring or utilizing an aircraft during production will require the placement of special coverage. In order for your Aon account service team to evaluate and review the specifics of the use of aircraft and arrange the appropriate coverage, please provide the following information **at least 5 business days prior to any aircraft usage:**

1. Exact date of use & hours each day: \_\_\_\_\_

2. Location: \_\_\_\_\_

3. Description of aircraft: \_\_\_\_\_ "N" Registration Number: \_\_\_\_\_

4. Name of Aircraft Company \_\_\_\_\_  
Phone No. \_\_\_\_\_ Email \_\_\_\_\_

5. Details concerning aircraft usage (i.e. aerial filming or scouting, air to air filming, air to ground filming, etc.) \_\_\_\_\_

6. Please provide full description of production including area where filming will occur. Please provide details or any stunts or special/unusual hazards  
\_\_\_\_\_

7. Number of persons in aircraft at any one time and relationship to the Production Company and/or Advertising Agency:

Person	Relationship to Production Company	Workers Compensation Coverage	
		Yes <input type="checkbox"/>	No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>
_____	_____	Yes <input type="checkbox"/>	No <input type="checkbox"/>

8. The seating capacity and weight of aircraft: Seating Capacity \_\_\_\_\_ Weight \_\_\_\_\_

9. Value of hull: \$ \_\_\_\_\_

10. Name of pilot and number of hours experience in craft: \_\_\_\_\_

11. Who is the pilot employed by: \_\_\_\_\_

**(Please confirm Pilot is covered Under Aircraft Owner's Policy)**

12. Provide: (1) Aircraft Rental Agreement, including Hold Harmless (sample wording attached); (2) Certificate of Insurance from the owner/operator evidencing coverage for Aircraft Liability (minimum limit of \$5,000,000 with no passenger sub-limit) & Hull Physical Damage; (3) Certificate of Insurance to evidence that Production Company, Network and Discovery, Inc and their parents, their subsidiaries and affiliates and their respective officers, directors, agents and employees are additional insured with respect to damage to the aircraft's hull; (4) Certificate of Insurance to evidence that owner/operator's insurance company waives its rights of subrogation against Production Company, Network and Discovery, Inc. and their parents, their subsidiaries and affiliates and their respective officers, directors, agents and employees with respect to damage to the aircraft's hull; and (5) Evidence of workers comp/employers liability coverage from the owner/operator covering pilot and crew.



## Aircraft Hold Harmless Agreement “Sample Wording Only”

\_\_\_\_\_ agrees to indemnify and hold harmless \_\_\_\_\_  
("Owner of Aircraft") ("Production Company, Network and Discovery, Inc and their parents, their subsidiaries and affiliates and their respective officers, directors, agents and employees")

from and against any and all claims, liability, losses, damages, costs, and expense including attorney fees, arising out of the use of the aircraft

\_\_\_\_\_ hereby waives any claims against and releases \_\_\_\_\_  
("Owner of Aircraft") ("Production Company, Network and Discovery, Inc and their parents, their subsidiaries and affiliates and their respective officers, directors, agents and employees")

Absolutely and forever, of and from any and all claims liability and whatsoever arising in any way out of the use of the Aircraft in any manner in connection with the Production, including (but not limited to) any claims and liability for the damage to the Aircraft and/or for liability to any third parties whatsoever.

**This is only sample wording and should be reviewed by and approved by your legal council**



## Production Handbook

# Unmanned Aerial Vehicle Questionnaire

The Program does not automatically cover the use of an unmanned aerial vehicle ("UAV"). Renting, hiring or utilizing a UAV during production will require special coverage. In order for your Aon account service team to evaluate and review the specifics of use of any UAV and arrange the appropriate coverage, please provide us with 1) a completed UAV questionnaire, 2) a certificate of insurance from the UAV owner/operator evidencing at least \$1,000,000 of aircraft liability coverage and adding the Production Company, Network, Discovery, Inc and their parents, their subsidiaries and affiliates and their respective officers, directors, agents and employees as additional insureds AND 3) a copy of the UAV rental agreement at least 5 business days prior to the use of any UAV in the production. **Please note that any extra expense incurred by production as the result of a filming permit being revoked by a civil authority arising out of the unauthorized use of the UAV is not covered**

DATE COMPLETED	
PURPOSE OF UAV USE / DESCRIPTION OF PLANNED UAV ACTIVITY	
NAME & ADDRESS OF UAV OWNER/OPERATING COMPANY	
NAME & EXPERIENCE OF THE INDIVIDUAL(S) WHO WILL BE OPERATING/PILOTING THE UAV(S)	
WHO IS THE UAV OPERATOR/PILOT EMPLOYED BY?	
WILL THE UAV'S CAMERA OPERATOR(S) BE SOMEONE OTHER THAN THE PERSON(S) OPERATING/PILOTING THE UAV(S)?	
IF SO, WHO IS THE UAV CAMERA OPERATOR EMPLOYED BY?	
DATE(S) OF UAV USE	
LOCATION(S) OF UAV USE	
NUMBER OF UAV(S) BEING UTILIZED FOR THE SHOOT	
NUMBER OF UAV(S) BEING OPERATED AT ANY ONE TIME	
UAV – MODEL/YEAR/MANUFACTURER/DESCRIPTION	
HULL VALUE OF EACH UAV	

## Unmanned Aerial Vehicle Questionnaire (Cont'd)

TOTAL WEIGHT OF EACH UAV (Must be less than 50 lbs) <b>(COVERAGE REQUIREMENT)</b>	
MAXIMUM FLIGHT SPEED (Must be less than 30 MPH) <b>(COVERAGE REQUIREMENT)</b>	
WILL THE UAV(S) BE FLOWN OVER AN AREA WHICH IS POPULATED BY EITHER PERSONS OR BUILDING? IF YES PLEASE PROVIDE DETAILS.	
DOES THE UAV OWNER/OPERATOR HAVE AN EXEMPTION FROM THE FAA (OR FOREIGN AVIATION AUTHORITY) TO FLY THE UAV(S)? <b>(COVERAGE REQUIREMENT)</b>	___ YES ___ NO
WILL THE UAV(S) BE FLOWN BELOW 400 FEET? <b>(COVERAGE REQUIREMENT)</b>	___ YES ___ NO
WILL THE UAV(S) BE FLOWN AT LEAST 5 MILES FROM ANY AIRPORT OR AVIATION FACILITY? <b>(COVERAGE REQUIREMENT)</b>	___ YES ___ NO
WILL THE UAV(S) BE OPERATED DURING DAYLIGHT CONDITIONS? <b>(COVERAGE REQUIREMENT)</b>	___ YES ___ NO
WILL THE UAV(S) BE OPERATED WITHIN THE LINE OF SIGHT OF THE OPERATOR(S)? <b>(COVERAGE REQUIREMENT)</b>	___ YES ___ NO
WILL THE UAV(S) BE OPERATED WITHIN A MAXIMUM DISTANCE OF 1,650 FEET (0.3 MILES) FROM THE OPERATOR? <b>(COVERAGE REQUIREMENT)</b>	___ YES ___ NO
PRIMARY LIABILITY INSURANCE LIMIT CARRIED ON THE UAV(S) (INCLUDING BOTH BODILY INJURY & PROPERTY DAMAGE)	
MUST ATTACH CERTIFICATE OF INSURANCE FROM THE UAV OWNER/OPERATOR EVIDENCING AT LEAST \$1MIL IN AICRAFT LIABILITY INSURANCE, THE HULL/PHYSICAL DAMAGE LIMIT, AND NAMING THE PRODUCTION COMPANY, NETWORK, AND DISCOVERY, INC. AND THEIR PARENTS, SUBSIDIARES AND AFFILIATES AND THEIR RESPECTIVE OFFICERS, DIRECTORS, AGENTS AND AS ADDITIONAL INSUREDS. CERTIFICATE OF INSURANCE MUST STATE THAT COVERAGE IS PRIMARY AND NON-CONTRIBUTORY TO COVERAGE CARRIED BY THE ADDITIONAL INSUREDS.	ATTACHED? ___ YES ___ NO



## Production Handbook

WE RECOMMEND OBTAINING A WAIVER OF SUBROGATION FOR THE BENEFIT OF THE ADDITIONAL INSUREDS AS RESPECTS PHYSICAL DAMAGE TO THE UAV'S HULL	ATTACHED? <input type="checkbox"/> YES <input type="checkbox"/> NO

## Animal Questionnaire

Animal mortality coverage up to £250,000 on an **“Accident Only”** basis is automatically provided under this insurance program. Additional information is required for **sickness/illness** coverage to apply. Please provide the following information to Aon at least **5 business days *prior to the use of any animals:***

1. Dates \_\_\_\_\_

2. Location \_\_\_\_\_

3. Provide list of animals (kind of animals and names), their value and their use:

Animal	Name	Value	Use in production <i>Please be as specific as possible.</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Trainer:  
 Name: \_\_\_\_\_ Telephone No. \_\_\_\_\_  
 Address: \_\_\_\_\_

5. How are the animals being transported? \_\_\_\_\_  
 Is the Production Company responsible for the animals while being transported? Yes  No

6. Provide a current Veterinary Certificate for each animal.

***Note: If sickness coverage is required, we must have a current veterinary certificate, prior to production.***



## Cast Insurance Questionnaire

Please provide the following to Aon as soon as possible *prior to production*:

1. Name of Artist \_\_\_\_\_
2. Age \_\_\_\_\_
3. Dates of Production \_\_\_\_\_
4. Location \_\_\_\_\_
5. Description of role \_\_\_\_\_
6. Please provide your Aon Account Service Team with the names of the individuals you want to include for accident only cast coverage.
7. In order to obtain full cast coverage, please note the following: **the artist must complete and sign the Statement of Health Form.**

**The Statement of Health form must be submitted to your Aon Account Service Team well before the start of production.** Any "Yes" answers on the Statement of Health must be explained in detail. Please note that any missing or illegible information on the form will lead to a delay in the underwriting review process.

Coverage is subject to policy terms and conditions.

## Fine Arts, Jewelry and Antiques Questionnaire

Fine Arts, Jewelry and antiques carry a sub-limit of £250,000. Whenever the production plans on utilizing these items, the following information to Aon at least 5 business days **prior to production**:

1. Dates \_\_\_\_\_
2. Location \_\_\_\_\_
3. Provide a detailed list, including values, of Fine Arts, Jewelry, Antiques, etc. (Include attachment if necessary with itemized breakdown):  
\_\_\_\_\_
4. Value of each item: \_\_\_\_\_
5. Description of use: \_\_\_\_\_
6. Who is being held responsible for property during transit to and from location? \_\_\_\_\_
7. If production for more than one day, where will Fine Arts, etc. be stored and/or guarded when not being used for production. Security details required. \_\_\_\_\_
8. What type of security is used while Fine Arts, Jewelry, Antiques are in the care, custody, or control of production?  
\_\_\_\_\_
9. If production is for more than one day, where will Fine Arts, Jewelry, Antiques be stored and/or guarded when not being used for production?  
\_\_\_\_\_

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Date \_\_\_\_\_

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Title of Production \_\_\_\_\_

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Production Company \_\_\_\_\_

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## Firearms Questionnaire

1. Is the firearm/weapon use indoor or outdoor? \_\_\_\_\_
2. Is the location insured for their operations? Yes  No
3. Has permission from the property owner and/or proper permits been obtained? Yes  No
4. Will eye and ear protection be worn? Yes  No
5. Who owns the weapons? \_\_\_\_\_
6. Who will be using the weapons? \_\_\_\_\_
7. Do they have experience firing weapons? Yes  No
8. Please describe the weapons. i.e. make, model \_\_\_\_\_  
\_\_\_\_\_
9. Please describe the backdrop. \_\_\_\_\_  
\_\_\_\_\_
10. Please provide any other details pertinent to the activity. \_\_\_\_\_  
\_\_\_\_\_

## Foreign Location and Coverage Questionnaire

If your production activities take you out of the United Kingdom, special insurance may be required. Please provide the following to Aon at least 5 business days **prior to the start of production**:

1. Dates of travel \_\_\_\_\_

2. Location \_\_\_\_\_

3. Number of UK hires travelling abroad \_\_\_\_\_

Number of weeks outside UK \_\_\_\_\_

Number of Third Country Nationals \_\_\_\_\_

Any local hires? Yes  No

Contact, outside UK Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Will you be subcontracting with a local production company? Yes  No

If so, please provide Name, Address, Telephone and Fax Numbers:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Fax \_\_\_\_\_

Maximum number of people traveling in any one conveyance at any one time: \_\_\_\_\_

Description of production operations (please be as specific as possible) \_\_\_\_\_

Any stunts or pyrotechnics? Yes  No

Foreign Production Budget: \_\_\_\_\_

**Foreign production companies must provide evidence of local public liability coverage with a minimum limit of £1M and local auto liability coverage in accordance with local compulsory requirements at a minimum and add the UK production company (if any), Network, Discovery Corporate Services Ltd and Discovery, Inc. as additional insureds. Foreign Production Companies must also maintain any local statutory insurance coverages in order to comply with the laws of the countries in which they are domiciled. Certificates of required insurance must be provided before production starts.**

**FOR SHOTS OUTSIDE OF THE UK, THERE IS NO EMPLOYERS' LIABILITY/WORKERS COMPENSATION COVERAGE (OR THE FOREIGN EQUIVALENT) PROVIDED UNDER THIS INSURANCE PROGRAM. It is the responsibility of the Production Company (or the employer of record) to ensure that any local hires, UK hires, or third country nationals are covered for Workers Compensation (or the local equivalent).**

**UNDER NO CIRCUMSTANCES CAN INSURANCE BE EXTENDED TO COUNTRIES SUBJECT TO UK EMBARGOES OR SANCTIONS.**

## U.S. & Canada Filming Location and Coverage Questionnaire

If your production activities take you to the United States, its territories and possessions, or Canada, special insurance may be required. Please provide the following to Aon at least 5 business days **prior to the start of production**:

1. Dates of travel \_\_\_\_\_

2. Location including City & State \_\_\_\_\_

3. Number of UK hires travelling abroad \_\_\_\_\_

Number of weeks outside UK \_\_\_\_\_

Number of Third Country Nationals \_\_\_\_\_

Any local U.S. or Canada hires? Yes  No

Contact Details, outside UK Name \_\_\_\_\_ Phone No. \_\_\_\_\_

Will you be subcontracting with a local production company? Yes  No

If so, please provide Name, Address, Telephone and Fax Numbers:

Name \_\_\_\_\_ Telephone \_\_\_\_\_

Address \_\_\_\_\_ Fax \_\_\_\_\_

Maximum number of people traveling in any one conveyance at any one time: \_\_\_\_\_

Description of production operations. \_\_\_\_\_

Any stunts or pyrotechnics? Yes  No

U.S. or Canada Production Budget: \_\_\_\_\_

STATE	WAGE ROLL For US crew/cast hired direct ((ie. not via payroll agency/



## Production Handbook

# Auto (Stunt Driving and/or Precision Driving) Questionnaire

If your production involves stunt driving and/or precision driving please provide the following to Aon at least 5 business days *prior to any precision driving*:

Precision Driving means: Two or more vehicles driving in unison, synchronization, or choreographed interaction.

Unless specifically arranged, there is no coverage for vehicles involved in racing, chase scenes or stunts when:

- Any or all wheels of the vehicle leave the driving surface.
- When tire traction is broken.
- When any driver's vision is impaired.
- When the speed of the vehicle(s) is greater than normally safe for the condition of the driving surface.

**IMPORTANT: Contact your Aon Account Service Team immediately to review any or all of these activities and to arrange all necessary and required insurance coverage. Timely notice is required to ensure that we meet your production timelines.**

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Open or closed set	Owner Name
Describe details of driving activity	
Date(s) of driving actively	
Location	
Make, model, and value of each vehicle used in sequence (Provide attachment if necessary)	
Will there be a medic on set or nearby a hospital?	
Describe road conditions and estimated driving speed	
Provide the names for each driver.	
Attach professional driving resumes for each driver.	
Is worker's comp provided for each driver? If not, is each driver signing a bodily injury waiver?	
Who is responsible for providing physical damages coverage for any vehicles?	
Is the production required by written contract to provide physical damage coverage for the vehicles?	

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## Production Handbook

# Pyrotechnics Questionnaire

If your production involves pyrotechnics please provide the following to Aon at least 5 business days **prior to any pyrotechnics**:

If you have contracted a pyrotechnician or a Pyrotechnics company secure a copy of their license and insurance.

Location of shoot	
Date(s) of shoot	
Attach a storyboard and/or a detailed description of the pyrotechnic effects and the specifications of each effect below. Attach the pyrotechnician's résumé. Attach a separate sheet to describe the effects, if necessary	
Describe the area surrounding the location and the precautions you will take to protect cast, crew and the public.	
Will any fire supervisor be on set?	
Will the fire department be on standby?	
Where is the nearest hospital?	
How many people will be onset during the effects	
Name of pyrotechnics vendor	
Address	
Contact's Name	E-mail
Phone	Cell Phone
Federal license #	State license #
Does the vendor have Public Liability insurance?	Employers Liability/Workers' Compensation?
Provide Aon with a copy of the vendor's Certificate of Insurance that includes the production company, Network, Discovery Corporate Services Ltd and Discovery, Inc. as Additional Insureds	
Will the fire department be on standby	
Have necessary permits been obtained	
Are railroads, trains, or planes involved? If yes, describe	



## Railroad Questionnaire

Whenever production is to take place on a train, on train tracks, or in a railroad facility, please provide the following to Aon at least 5 business days **prior to the use of any railroads**:

1. A copy of the railroad contractual agreement. (THIS IS MANDATORY)
2. Description of scenes involving railroad equipment: \_\_\_\_\_
3. Dates and times equipment is to be used: \_\_\_\_\_
4. Locations of equipment: (exact street address)  
Where is equipment being stored? \_\_\_\_\_  
Where is equipment being moved? \_\_\_\_\_  
Where is equipment being returned to after use is completed? \_\_\_\_\_
5. Type of equipment used (rolling cars, engines or other equipment.) Please provide a detailed list.  
\_\_\_\_\_
6. Describe activities involving the railroad equipment and personnel \_\_\_\_\_  
\_\_\_\_\_
7. How many people will be "on board"? \_\_\_\_\_
8. Distances and speed of equipment: \_\_\_\_\_
9. Any stunts? Yes  No  If so, please list: \_\_\_\_\_
10. Will main line tracks be used during production days? Yes  No
11. What security measures are being taken to keep public away from the railroad cars? \_\_\_\_\_  
\_\_\_\_\_
12. Will there be an interruption of regular service? Yes  No
13. Will the train be under the direction of the production company or will it maintain its normal routes, speeds, schedule etc. \_\_\_\_\_  
\_\_\_\_\_
14. Is the train being brought from another location to the production location? Yes  No   
Provide full details of how the railroad equipment will be transported.  
Include the addresses of the locations and the distance. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
15. Who is responsible for it while in transit? \_\_\_\_\_



## Stunt Questionnaire

In order to properly evaluate the hazards involving stunts and to determine the need for additional coverage, please provide the following information to Aon at least 5 business days **prior to any stunts:**

1. Describe type of scenes being filmed: \_\_\_\_\_  
\_\_\_\_\_
  
2. List stunts by type, location and date:
 

Stunt Type	Location	Date
_____	_____	_____
_____	_____	_____
_____	_____	_____
  
3. Describe safety measures used to protect participants, public and equipment \_\_\_\_\_  
\_\_\_\_\_
  
4. Is the set closed to the general public? \_\_\_\_\_
5. Who is employer of record of person(s) performing stunt(s): \_\_\_\_\_  
\_\_\_\_\_
  
6. How many people involved in stunt scene? \_\_\_\_\_
  
7. Will there be a medic on set?  
\_\_\_\_\_
  
8. Please provide 1) bio/resume for each stunt person, including stunt coordinator.; 2) contact information, including phone# and email address for stunt coordinator

**Note: We recommend that you advise your equipment vendor about how the equipment will be used, i.e. taken into hazardous environment, camera taken down waterslide, etc. Any recommendations suggested by the vendor to protect the equipment should be adhered to ensure proper care.**



Production Handbook

## Watercraft Questionnaire

Whenever the production plans on using watercraft this form must be completed and forwarded to Aon at least 5 business days **prior to any watercraft usage.**

Applicant (Insured): \_\_\_\_\_ Name of Vessel: \_\_\_\_\_  
 Declared Production: \_\_\_\_\_

Hull Coverage: Yes  No  Operating \$1 Mil Limit  
 P&I Coverage: Yes  No  Dockside \$10 Mil Limit

Registry or Documentation No.: \_\_\_\_\_  
 Date(s) Vessel to be used: \_\_\_\_\_ No. of Days: \_\_\_\_\_  
 Vessels Legal Owner \_\_\_\_\_  
 Address \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Contact \_\_\_\_\_ Phone No. \_\_\_\_\_  
 Year of Vessel \_\_\_\_\_ Length of Vessel \_\_\_\_\_ Value of Vessel \_\_\_\_\_  
 Vessel Make & Type: \_\_\_\_\_ Beam Width \_\_\_\_\_  
 Where is Vessel Docked? \_\_\_\_\_  
 Is this a "Report to Location" deal for the use of the vessel? Yes  No   
 How many on board, at any one time \_\_\_\_\_ Film Crew \_\_\_\_\_ Vessel Crew \_\_\_\_\_  
 Name of person who will pilot the vessel \_\_\_\_\_  
 Who will employ the master and crew? \_\_\_\_\_

Has the production company signed a charter agreement requiring you provide primary hull and P&I insurance on the vessel? Yes  No  \*Please attach charter agreement if applicable

Name of owner or suppliers insurance broker: \_\_\_\_\_  
 Contact (Agency) \_\_\_\_\_ Phone \_\_\_\_\_  
 Address \_\_\_\_\_  
 Will vessel be operated under its own power during production? Yes  No   
 Description of how the vessel will be used (please be specific) \_\_\_\_\_  
 Any water-skiing? Yes  No  Any stunts? Yes  No   
 Other vehicles to be towed? \_\_\_\_\_  
 Any vessel to be used out of the water? \_\_\_\_\_

Make a thorough inspection of the items shown on the following page, noting any deficiencies or damage (in writing) on the Charter Agreement or other contract or agreement form, and have the owner initial the same to acknowledge the items noted. Photographs of the vessel to document the condition of the vessel, is recommended. In the event of an extended period of use of a private yacht, we highly recommend an "on charter survey" be done to establish the exact condition of the vessel prior to our use and a subsequent "off charter survey" promptly when production is completed.

In what condition is this vessel?	Hull/Outside paint, scrapes, etc...	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	_____
	Interior wear & tear, mars & burns	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	_____
	Decks scrapes, wear & tear	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	_____
	Engine/transmission, trial run	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	_____
	Equipment/weathered, damaged	Good <input type="checkbox"/>	Fair <input type="checkbox"/>	Poor <input type="checkbox"/>	_____



## Weather Insurance Questionnaire

In order to bind weather insurance, a Weather Insurance application must be completed, signed, dated and sent with payment directly to the Weather Insurer **at least 10 days prior to insured filming date(s)**. The check must be issued directly by the Production Company.

Producer Company	Aon/Albert G. Ruben Ins.	Mailing Address	122 Leadenhall Street
Producer Name	Matt Stoodley		London EC3V 4AN
Telephone No.	+44 (0) 1245 706079	Facsimile No.	N/A
Email Address	matt.stoodley@aon.co.uk	Web Site Address	www.aonagr.com
Producer Licensed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	E & O Insurance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Has event had weather insurance coverage previously? \_\_\_\_\_ If yes, when: \_\_\_\_\_  
 If applicable, loss history: \_\_\_\_\_ Carrier used: \_\_\_\_\_

Insured Name _____	Contact Person _____
Insured Address _____	Telephone No. _____
	Facsimile No. _____

Event Type \_\_\_\_\_ Event Location(s) \_\_\_\_\_

Dates of Event	Hours of Event	Hours of Coverage	Limit Per Day
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

### Rain

I. Total Accumulation:	1/100" <input type="checkbox"/>	1/20" <input type="checkbox"/>	1/10" <input type="checkbox"/>	1/5" <input type="checkbox"/>	1/4" <input type="checkbox"/>	1/3" <input type="checkbox"/>	1/2" <input type="checkbox"/>	3/4" <input type="checkbox"/>	Other _____
II. Rain Free Hours:	Rain Free Hours Definition:				1/100" <input type="checkbox"/>	2/100" <input type="checkbox"/>	3/100" <input type="checkbox"/>	5/100" <input type="checkbox"/>	Other _____
<input type="checkbox"/> _____ hours out of _____ hours									

### Alternative Peril Options

<input type="checkbox"/> Snow _____	<input type="checkbox"/> Lightning _____	<input type="checkbox"/> Fog _____
<input type="checkbox"/> Temperature <input type="checkbox"/> MAX <input type="checkbox"/> MIN	<input type="checkbox"/> Hurricane _____	<input type="checkbox"/> Tornado _____
<input type="checkbox"/> Wind Speed _____	<input type="checkbox"/> Adverse Weather _____	<input type="checkbox"/> No Fly _____

### Claim Settlement

- Closest National Weather Station \_\_\_\_\_
- On-Site Independent Weather Observer (to be approved by Weather Insurer) \_\_\_\_\_

*Coverage is subject to a completed application, full premium payment a minimum of 10 days prior to coverage inception, and acceptance/approval of Underwriter.*

**WEATHER INSURANCE IS PREPAID, FULLY EARNED AND CANNOT BE CANCELLED**

## Claim Reporting Procedure

All losses, thefts and accidents must be reported to Aon via the appropriate Claims Contact IMMEDIATELY.

Complete the "FIRST NOTICE OF CLAIM" attachment and email to the Aon CLAIM DEPARTMENT.

Or alternatively you can contact your account service team or the Aon Claim Supervisor directly.

Even if you are not sure a loss is or would be covered advise the Claim Department of Aon IMMEDIATELY.

***In the event of a catastrophic claim resulting in serious injury or death contact the Aon claims department immediately.***



## Production Handbook

### First Notice of Claim

When a claim occurs, this completed claim form needs to be sent to Aon **IMMEDIATELY** and the following additional items:

- 1) Certificate of Insurance issued to vendor/claimant
- 2) Rental Agreement/Location Contract with "Terms and Conditions" (For Equipment, Vehicle or Location losses)
- 3) If Claim involves theft or auto accident, include a police report.

In absence of immediate receipt of this information, claim reporting may be delayed which may jeopardize coverage.

#### GENERAL INFORMATION

POLICY #:
AGENCY / NETWORK:
ADVERTISER / CLIENT:
TITLE OF PRODUCTION:
PRODUCTION COMPANY:
PROD CO. ADDRESS:
CITY, STATE, ZIP CODE:
PROD CO. CONTACT:
TELEPHONE:
EMAIL:

#### LOSS INFORMATION

DATE:
LOCATION OF LOSS (Country/State/City):
COMPLETE DESCRIPTION OF LOSS:
ESTIMATE OF COST OR DAMAGE (with currency type):

#### CLAIMANT (party that was damaged and needs to be paid)

NAME:
ADDRESS:
TELEPHONE/E-MAIL:

Please forward the above information to:

**Production & Public Liability Claims**

**Maria Clark**  
+1 212-463-5583  
maria.clark@aon.com

**FUTI/PERSONAL ACCIDENT CLAIMS ONLY**

**Charles Kershaw**  
+44 (0) 207 086 3192  
charles.e.kershaw@aon.co.uk

# Required Claim Information

## Property Claim

- List of damaged props/equipment (description, make, model, age of item, replacement cost).
- Name/phone number of lessor.
  - Replacement invoice (if item replaced)
  - Original purchase receipt/invoice (if available)
  - Rental agreement
  - Police report (if you believe a theft or other crime occurred)
  - Photos (if available)
- Include in the information submitted to Aon a narrative, which indicates the condition of the property prior to production, and subsequent to production. This summary should offer explanation on how the damage to the property occurred.

## Negative Film/Faulty Stock, Camera and Processing

- Names/address/contact phone of film lab
- Shooting schedule in effect prior to the loss and revised schedule following the loss
- Production reports/call sheets
- Crew time cards documentation needed to verify payment of cast and crewmembers (guarantees, hourly vs. salaried employees)
- Payroll invoice (for verification of how fringes were calculated)
- Site location agreements/invoices when location fees are claimed
- Equipment rental Agreements - documentation needed to verify terms of agreements as they relate to delay in shooting i.e. to incident occurring.
- Report from film lab or camera vendor that describes the cause of the loss

## Extra Expense Claim

- Shooting schedule in effect just prior to loss and subsequent revisions
- Production reports/call sheets for principal photography
- Crew time cards documentation needed to verify payment of cast and crewmembers (guarantees, hourly vs. salaried employees)
- Payroll invoice (for verification of how fringes are calculated)
- Site location agreements/invoices when location fees are claimed.
- Equipment rentals agreements - documentation needed to verify terms of agreements as they relate to delay in shoot

## Automobile Accident Report

- Complete the Accident form and submit it to your employer immediately, along with a copy of the accident report and a description of the accident.
- Carefully examine all damage.
- Beware of "fake" investigators - (SAY NOTHING! - SIGN NOTHING!)
- Do not talk to anyone about the accident except:
  - your employer
  - The investigation officer
  - Your insurance investigator
- Do not argue with anyone at the scene of the accident. Show courtesy. Give your name and driver's license number as requested.

**Note:** In case of a serious accident, injury or death, telephone the Aon office **IMMEDIATELY**.