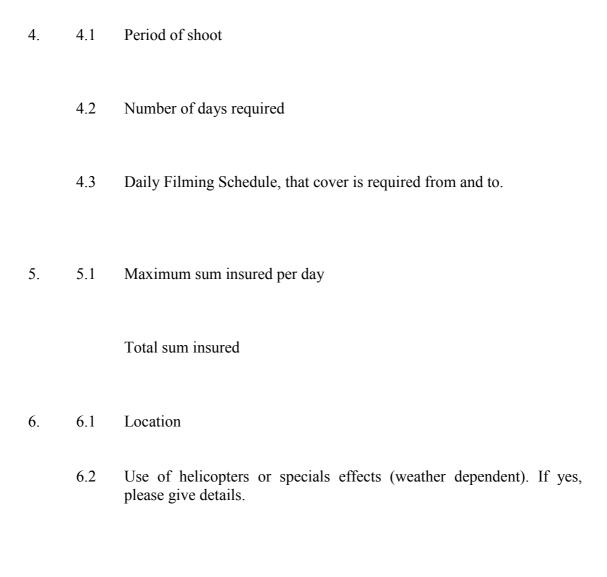


ADVERSE WEATHER (PHOTOGRAPHIC) PROPOSAL FORM

1.	1.1	Name of the Proposer	
	1.2	Address of Proposer	
2.	2.1	Name of production Company	
	2.2	Name of agency	
	2.3	Name of client	
		Name of Product	
	2.4	Airdate	
3.	3.1	Coverage required	
		Rain only Reasonable Photographic Conditions Sunshine Wind Precipitation	YES / NO YES / NO YES / NO YES / NO YES / NO
	3.2	How many hours in the scheduled day?	
	3.3	How many Non Consecutive hours insured out of the scheduled filming day?	
	3.4	How many consecutive hours insured out o	f filming day?







Please attach: storyboard, script, shooting schedule and weather budget

Please note: Continuity of weather conditions &/or clear blue sky ARE NOT COVERED by this form of insurance.

Declaration to be read, signed and dated by proposer.

I/We declare that according to my/our knowledge and belief the answers given in the proposal form are true and compete and I/we have disclosed all material facts. I/we agree that if any information has been given by any person other than myself/ourselves that person is my/our agent for that purpose.

Signature of proposer				
Position Held				
Date				