



Truman Van Dyke  
**TVD**  
Entertainment Insurance  
Since 1953

ENTERTAINMENT  
MOTION PICTURE PRODUCTION  
PACKAGE APPLICATION  
PYROTECHNICS QUESTIONNAIRE

Applicant:	
Production:	

Description of Location	Description of Scene	Date

Full description – What is being done?, How?, How many people on set ? Type and amounts of pyrotechnics materials used? Size of flame/sparks? Length of time of pyrotechnics?

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Describe surrounding location (how many feet from buildings/vegetation) & precautions taken for public and cast members

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PYROTECHNICS QUESTIONNAIRE continued

Who is Responsible?	
Number of pyrotechnicians?	
Bio/Resume of Pyrotechnicians (attach or enter below)	

Are they licensed?	<input type="checkbox"/> Yes	State <input type="checkbox"/> Federal <input type="checkbox"/>	Employees <input type="checkbox"/> Subcontractors <input type="checkbox"/>
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Are the stunt/pyrotechnicians people covered for workers compensation by a payroll service Company	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are they providing a certificate of insurance to you naming you as an additional insured for this project?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Are members of the required fire department standing by ?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Have the required permits been obtained?	<input type="checkbox"/> No	<input type="checkbox"/> Yes
Number of times the pyro gag will be performed, including rehearsals.		
Are there any railroads, trains or planes involved? (explain below)	<input type="checkbox"/> no	<input type="checkbox"/> Yes

**\*\*NOTE: THIS INFORMATION MUST BE SUBMITTED TO THE INSURANCE COMPANY AS SOON AS INFORMATION IS KNOWN AND MUST BE AT LEAST FIVE (5) DAYS PRIOR TO ANY SHOOT INVOLVING PYROTECHNICS AND MUST BE APPROVED BY THE COMPANY**

Please fax to 323 883-0024

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Insured's Signature