

## Savannah Entertainment Production Incentive Rebate Certification Application

Submit applications to:

SEDA Production Accounting  
c/o Hancock Askew & Co. LLP  
P.O. Box 2486  
Savannah, Ga. 31402

Overnight deliveries:

100 Riverview Dr.  
Savannah, Ga. 31404

912.234.8243

Contacts:

Michael McCarthy, Project Manager  
912.527.3319  
mmccarthy@hancockaskew.com

Will Curry, Project Accountant  
912.234.8243  
wcurry@hancockaskew.com

Tina Bloos, Administrative Support  
912.234.8243  
tbloos@hancockaskew.com

For qualification questions, contact SEDA's Entertainment Production Liaison, Ralph Singleton, at [rsingleton@seda.org](mailto:rsingleton@seda.org) or 310.980.2022.

I/we have read and understand the Savannah Production Incentive Guidelines.  yes

- Production must be scheduled to begin principal photography within 90 days of application.
- Production must meet with Savannah Film Office and spend a minimum two days of scouting before applying. Must have spoken with Ralph Singleton.
- Only one Production Company per project may receive certification for the rebate. In the instance of a work-for-hire, the work-for-hire company will not be eligible for the rebate.
- For every year claiming rebate, the applicant will need a certification letter.
- Project budget must be submitted along with this application in order for the application to be considered complete.

Application for year \_\_\_\_\_

Is the project fully funded?

yes  no

Is the production company applying for certification as a “work for hire” for another production company?

yes  no

Did the production company applying for certification hire another production company as a “work for hire?”  yes  no

If yes, what is the production company name?

\_\_\_\_\_

## PRODUCTION COMPANY INFORMATION

NOTE: While it is understood that start dates may change, *the applicant must be scheduled to begin principal and ongoing photography on the qualified film within 90 days after submitting this application.* In addition, principal photography shall begin within 5 days of the start date on the application. Any changes must be submitted for approval to Ralph Singleton and Accounting Firm immediately or Certification could be revoked. Applications submitted **MORE THAN 90 DAYS prior to start of principal photography WILL NOT BE CERTIFIED.**

### Legal Name and Address of Applicant:

Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Date of Incorporation or Formation: \_\_\_\_\_ Federal Tax ID Number: \_\_\_\_\_

**Production Company (if different than applicant):**

Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Date of Incorporation or Formation:** \_\_\_\_\_ **Federal Tax ID Number:** \_\_\_\_\_

**Parent Company, If Applicable:**

Legal Name: \_\_\_\_\_

Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Date of Incorporation or Formation:** \_\_\_\_\_ **Federal Tax ID Number:** \_\_\_\_\_

## Project Description

**Title of Project:**

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**Type of Production:**

- Feature Film
- Cable TV Series, number of episodes? \_\_\_\_\_ Season number \_\_\_\_\_
- Network TV Series, number of episodes? \_\_\_\_\_ Season number \_\_\_\_\_

**Script Attached?:**  yes  no

**Please provide a description of the project: (story line)**

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**Names of Talent Attached:**

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**Where in Chatham County are you planning to produce your project? (List locations):**

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## Production Information

The production will be asked to update this information once principal photography starts.

Estimated Total Number of Chatham County residents to be hired on the Production:

\_\_\_\_\_ (cast, crew, extras)

Wrap date: \_\_\_\_\_

Number of Proposed Shooting Days in Georgia: \_\_\_\_\_

Pre-Production Project Start  
Date:

No. of Chatham County Hires  
during Pre-Production:

No. of Work Days Employed:

\_\_\_\_\_  
Production Start Date (Principal  
Photography):

\_\_\_\_\_  
No. of Chatham County Hires  
during Production:

\_\_\_\_\_  
No. of Work Days Employed:

\_\_\_\_\_  
Post Production Start Date:

\_\_\_\_\_  
No. of Chatham County Hires  
during Wrap:

\_\_\_\_\_  
No. of Work Days Employed:

*NOTE: To qualify, 60% of the shooting days must be in Chatham County. Only 50% of shooting days must be in Chatham County for production budgets exceeding \$15 million.*

Shot Entirely in Georgia?

yes     no

If no, where else is the production being shot?

\_\_\_\_\_

Number of days shooting in Chatham County:

\_\_\_\_\_

Total Budget of Project:

\_\_\_\_\_

Distribution Plan:

\_\_\_\_\_

If television and commercial projects, which network?

\_\_\_\_\_

## Production Information (cont'd)

Theatrical distribution deal in place?  yes  no

Georgia Production Office Address: \_\_\_\_\_

Producer(s): \_\_\_\_\_

Phone: \_\_\_\_\_

Producer(s): \_\_\_\_\_

Phone: \_\_\_\_\_

Producer(s): \_\_\_\_\_

Phone: \_\_\_\_\_

Director: \_\_\_\_\_

Phone: \_\_\_\_\_

Line Director: \_\_\_\_\_

Phone: \_\_\_\_\_

Unit Production: \_\_\_\_\_

Phone: \_\_\_\_\_

Location Manager: \_\_\_\_\_

Phone: \_\_\_\_\_

## Credits and promotional materials

To complete eligibility requirements, applicants will provide the following items:

**Checklist:**

- Signed IRS form W-9 for the applicant / production company
- All versions of the crew and contact lists, budget, shooting schedule, production reports and vendor list
- Proof of funding
- Any and all documents required by the auditing accounting firm
- Five production still photos in electronic format with rights cleared for promotional use by SEDA.
- Final Chatham County Location Breakdown List to include physical address and contact information
- An electronic press kit
- Three (3) posters of the type designed for promotion of the finished project
- A DVD of the finished production

I agree (Print Name and Signature) \_\_\_\_\_

The above information will be provided by: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Company Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Email Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

## Agreement End Credit Roll

The end credit roll of a full-length motion picture that utilizes the Savannah Economic Development Authority's rebate must recognize Film Savannah and requires use of the Film Savannah logo. The Savannah Economic Development Authority reserves the right to refuse use of its logo(s) in the credits of a motion picture filmed or produced in Chatham County.

Authorized Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### Contact Information for Post

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Company: \_\_\_\_\_

Company Address: \_\_\_\_\_

City/State/ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_



## **Certification by Applicant**

Applicant is responsible for accuracy of all data and documentation included in this application. Initial applications are submitted to the Accounting Firm. Once submitted, applications will become the property of SEDA. It is the applicant's responsibility to inform SEDA in the event that there are changes to any information on the application. Amendments must be sent via email to the Accounting Firm.

Upon written request, applicants shall issue any necessary authorization to the appropriate Federal, State or local authority for the release of information concerning a production being considered under these administrative rules, including but not limited to financial reports and records relating to the applicant or to the production for which this rebate is requested.

By signing below, the applicant certifies that all the information contained herein and exhibits attached hereto are true to the best of their knowledge and are submitted for the purpose of obtaining rebate through the Savannah Economic Development Authority.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Certification by the Savannah Economic Development Authority

Certification Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_