



**Rhode Island Banking Institution:**

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Name

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Address

City

Zip Code

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Contact Person

Title

Telephone Number

**Location of Soundstage, if applicable:**

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Address

City

State

Zip Code

Country

**Brief Background of Company/Companies Involved in Production:** \_\_\_\_\_

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**Brief Story Synopsis:** \_\_\_\_\_

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Total Rhode Island Production Budget: \_\_\_\_\_

Start Date: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Number of principal and ongoing photography days in Rhode Island or, for live theatrical productions, length of theatrical run: \_\_\_\_\_

Number of principal and ongoing photography days outside of Rhode Island: \_\_\_\_\_

Anticipated Amount of Motion Picture Tax Credit: \_\_\_\_\_

**“ABOVE THE LINE” PERSONNEL**

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

Credits: \_\_\_\_\_

\_\_\_\_\_

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

Credits: \_\_\_\_\_

\_\_\_\_\_

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

Credits: \_\_\_\_\_

\_\_\_\_\_

**INTERNSHIPS**

Briefly describe or attach additional information on your participation in internship programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry:

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**Number of Interns:** \_\_\_\_\_

**TRAINING PROGRAMS**

Briefly describe or attach additional information on your participation in training programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry:

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**Number of Training Program Participants:** \_\_\_\_\_

### DIVERSITY PROGRAMS

Briefly describe or attach additional information on your participation in diversity programs offered by Rhode Island colleges, universities, labor organizations and non-profit organizations associated with the motion picture industry designed to promote and encourage training and hiring of Rhode Island residents who represent the diversity of the Rhode Island population:

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**Number of Minorities Hired:** \_\_\_\_\_

**Total Number of Rhode Island Residents Hired:** \_\_\_\_\_

### REQUIRED DOCUMENTATION (PLEASE ATTACH)

- Secretary of State Articles of Corporation
- Letter of Good Standing from Rhode Island Division of Taxation
- Certificate of Disclosure of Corporation
- Final Screenplay
- Letter of Intent of Viable Distribution signed by a major theatrical exhibitor or television network or cable station
- Calendar of days each "above the line" personnel (i.e.; Director, Producers, Writers and Featured Actors) of the production arrived, performed work in and departed Rhode Island
- Daily Production Schedule
- Cost Report (*example under All Forms at [www.film.ri.gov](http://www.film.ri.gov)*)
- Detailed RI Budget
- Accountant's Certification of Cost Report
- Production Tax Credit Information Request Form
- Diversity Tracking Chart (*example under All Forms at [www.film.ri.gov](http://www.film.ri.gov)*)
- 2 DVD's of the finished product (to the Film Office only).

By signing below, I/we understand that, along with this completed document and required documentation, in compliance with the Rules and Regulations, I/we must provide screen credit to the Rhode Island Film & Television Office using the exact language and logo as follows:

***With grateful acknowledgement to the State of Rhode Island and  
Steven Feinberg, the Rhode Island Film & Television Office***



**www.film.ri.gov**

The Rules and Regulations definition of screen credit is as follows: "Screen Credit' means a Motion Picture company engaged in a State Certified Production shall accord the State of Rhode Island, The Rhode Island Film & Television Office, along with the approved name and title of the Film Office Director, at the Film Office Director's sole discretion, a credit on screen "With grateful acknowledgement to" in the end titles of the Motion Picture with all other characteristics (including, without limitation, size, form, placement and duration) of such credit that equal to end credit of principal actor."

I/we also understand that I/we must provide the Rhode Island Film & Television Office two (2) DVD's of the finished production (theatrical productions exempt).

Under penalty of perjury, I/we declare that I/we have examined this form, including any accompanying documents and information, and to the best of my/our knowledge, the information and statements are correct and complete. I understand that providing false or misleading information is a violation of law and may subject me/us to legal penalties.

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

\_\_\_\_\_  
Signature of Authorized Agent

\_\_\_\_\_  
Print Name of Authorized Agent

\_\_\_\_\_  
Title of Authorized Agent

\_\_\_\_\_  
Date

**IMPORTANT NOTE:** *If an Applicant believes that certain information submitted as part of its application is exempt from public disclosure, such information should be marked "Exempt from Public Disclosure" and referenced RIGL §38-2-2(4)(B).*

**Please send one set each Final Application and documentation to:**

Steven Feinberg, Executive Director  
Rhode Island Film & Television Office  
One Capitol Hill, 3<sup>rd</sup> Floor  
Providence, RI 02908

and

Tax Administrator  
Rhode Island Division of Taxation  
One Capitol Hill, 1<sup>st</sup> Floor  
Providence, RI 02908

