

# INDEPENDENT CONTRACTOR SUPPLEMENT TO MEDIA SPECIAL PERILS POLICY APPLICATION

Note: All questions must be answered. All requested attachments must accompany application.

## IMPORTANT NOTICE – NEW APPLICATION FORMAT

THIS APPLICATION IS A DOWNLOADABLE WORD TEMPLATE, WHICH CAN BE FILLED OUT ELECTRONICALLY AND TRANSMITTED VIA EMAIL. IN ORDER TO SAVE THIS APPLICATION TEMPLATE TO YOUR COMPUTER FOR USE, ENTER DATA INTO ANY FIELD AND CLICK THE  (EXIT) IN THE UPPER RIGHT OF THE APPLICATION WINDOW. THIS ACTION WILL BRING UP A PROMPT TO SAVE THE DOCUMENT TO YOUR OWN COMPUTER. TO PRINT THIS DOCUMENT WITHOUT MODIFYING OR SAVING, USE THE "CTRL-P" KEYBOARD FUNCTION TO PROMPT A PRINT COMMAND.

1. Name of applicant (as it should be stated on applicant's policy, if issued):  
\_\_\_\_\_
2. Please indicate what percentage of applicant's content is:
  - A. Original content created by applicant: \_\_\_\_\_%
  - B. Original content created by others (non-employees) for applicant: \_\_\_\_\_%
  - C. Previously published, released or archived content to be republished, re-released or archived by applicant: \_\_\_\_\_%
3. With regard to content referenced in 2.B., above, does applicant acquire from the author/content provider a written assignment of rights in the matter?  Yes  No  
Please provide a copy of applicant's standard contract used to accomplish the assignment of such rights to applicant.  
\_\_\_\_\_
4. With regard to content referenced in 2.C. above, do(es) the content provider(s) agree, in writing, to hold applicant harmless for claims that might arise involving the ownership of rights in the content?  Yes  No  
If yes, please provide a copy of a representative example of such an agreement applicant has received from such a content provider.  
\_\_\_\_\_

ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND IN NEW YORK SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

The statements and answers made in this application and in attachments are true to the best of my knowledge. I have neither omitted nor misrepresented any information.

Name \_\_\_\_\_  
(please type or print)

Name \_\_\_\_\_  
(signature of Authorized Representative)

Title \_\_\_\_\_

Date \_\_\_\_\_