

## WASHINGTON FILMWORKS FUNDING ASSISTANCE APPLICATION FOR COMMERCIALS

The following documents must come attached to this application:

- Story or Shooting Boards
- Budget – the most current full line-item production budget that includes in-state and out-of-state spend and clearly indicates projected in-state qualified expenditures and Qualified Non-Resident Labor (if applicable.)
- Advertising Agency Award Letter – that indicates the amount of funds the agency is awarding for the project
- Applicant’s Letter of Interest – letter detailing how the project represents and reflects the best of Washington State’s commercial motion picture industry and specifically how the project would help raise the profile of Washington State’s creative community. The letter should also address the applicant’s willingness and ability to enter into a contract with Washington Filmworks setting forth the terms and conditions of funding assistance.

### AGENCY INFORMATION

NAME OF COMPANY: \_\_\_\_\_

NAME OF PARENT COMPANY (if applicable) \_\_\_\_\_

TYPE OF BUSINESS ENTITY (i.e., LLC, partnership, etc.): \_\_\_\_\_

PERMANENT MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

FEDERAL EMPLOYER ID #: \_\_\_\_\_

WASHINGTON UNIFORM BUSINESS IDENTIFIER # (if applicable) \_\_\_\_\_

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## PRODUCTION COMPANY INFORMATION

NAME OF PRODUCTION COMPANY: \_\_\_\_\_

NAME OF PARENT COMPANY (if applicable) \_\_\_\_\_

TYPE OF BUSINESS ENTITY (i.e., LLC, partnership, etc.): \_\_\_\_\_

PERMANENT MAILING ADDRESS: \_\_\_\_\_  
\_\_\_\_\_

CONTACT NAME: \_\_\_\_\_ TITLE: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

FEDERAL EMPLOYER ID #: \_\_\_\_\_

WASHINGTON UNIFORM BUSINESS IDENTIFIER # (if applicable) \_\_\_\_\_

## APPLICANT INFORMATION (Applicant is the client of record)

IS THE APPLICANT THE PRODUCTION COMPANY OR THE AGENCY LISTED ABOVE?

Production Company

Agency

CONTACT NAME: \_\_\_\_\_

COMPANY: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

EMAIL: \_\_\_\_\_ WEBSITE: \_\_\_\_\_

## PRODUCTION AGREEMENT SIGNATORY (IF DIFFERENT THAN ABOVE):

\_\_\_\_\_ TITLE \_\_\_\_\_

## TYPE OF PRODUCTION

Check all that apply to this production:

- |  |  |
|--|--|
| <input type="checkbox"/> National Commercial             | <input type="checkbox"/> Web Only                    |
| <input type="checkbox"/> Regional Commercial (Northwest) | <input type="checkbox"/> Kiosk or In-Store Promotion |
| <input type="checkbox"/> Regional Commercial (Other)     |  |

**SHOOTING FORMAT:** \_\_\_\_\_

**PROJECT INFORMATION**

PRODUCT: \_\_\_\_\_

# OF COMMERCIALS BEING PRODUCED DURING PRODUCTION PERIOD: \_\_\_\_\_

BRIEF SYNOPSIS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

MAIN WASHINGTON LOCATIONS: \_\_\_\_\_

\_\_\_\_\_

DOES THE PROJECT FEATURE LOCATIONS IN WASHINGTON STATE AS THE PRINCIPLE SCRIPTED LOCATION? YES  NO

*If so, what cities, towns or key locations are included in the script or storyboard?*

**ESTIMATED NUMBER OF HIRES:** \*Please see the current Guidelines & Criteria found [on our website](#) for requirements surrounding total amount of Washington resident labor force as well as additional information about Qualified Non-Resident labor.

	Column A	Column B	Column C	Combine Columns A, B, C
	Washington Residents	*Qualified Non-Resident (If Applicable)	Remaining Non-Resident	Total Hires in Washington Schedule
PRINCIPAL CAST				
DAY PLAYER CAST				
ATL – NOT INCL CAST (eg: Writers, Producers, etc)				
EXTRAS				
CREW				
POST PROD				

# Washington Filmworks

**ESTIMATED WORKER DAYS:** Worker Days are calculated by multiplying the number of workers by the number of days they are scheduled to work. (e.g.: 5 crew scheduled to work 10 days is 50 worker days.)  
\*Please see the current Guidelines & Criteria found on our website for requirements surrounding Qualified Non-Resident labor.

	Washington Resident	*Qualified Non-Resident (If Applicable)	Remaining Non-Resident
PREP			
SHOOT/WRAP			
POST			

## PRODUCTION SCHEDULE

	Total for Project	In Washington State
NUMBER OF SHOOT DAYS		
PRE-PRODUCTION DATES mm/dd/yy-mm/dd/yy	-	-
START DATE FOR PRINCIPAL PHOTOGRAPHY		
EXPECTED WRAP DATE		
POST-PRODUCTION DATES mm/dd/yy-mm/dd/yy	-	-

## KEY PERSONNEL ASSOCIATED WITH THIS PRODUCTION

DIRECTOR: \_\_\_\_\_

Washington Resident? Yes No

PRODUCER(S) \_\_\_\_\_

*Of the producers listed above, how many are Washington Residents?* \_\_\_\_\_

PRODUCTION SUPERVISOR OR COORD \_\_\_\_\_

Washington Resident? Yes No

DIRECTOR OF PHOTOGRAPHY: \_\_\_\_\_

Washington Resident? Yes No

PRODUCTION DESIGNER/ART DIRECTOR: \_\_\_\_\_

Washington Resident? Yes No

# Washington Filmworks

LOCATION MANAGER: \_\_\_\_\_  
Washington Resident? Yes  No

CASTING DIRECTOR: \_\_\_\_\_  
Washington Resident? Yes  No

TALENT FEATURED IN COMMERCIAL: \_\_\_\_\_

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*Of the talent listed above, how many are Washington Residents?* \_\_\_\_\_

## QUALIFIED NON-RESIDENT POSITIONS (if applicable)

If the production believes they will qualify for a return on Non-Resident labor please list the anticipated qualified Non-Resident positions below.

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## BUDGET INFORMATION

	TOTAL BUDGET	WASHINGTON SPEND	Qualified Non-Resident Labor (If Applicable)
PRE-PRODUCTION			
PRODUCTION			
POST PRODUCTION			
TOTAL			

## IF BUDGETING FOR A POSSIBLE COVID-19 SHUTDOWN / QUARANTINE

Projects may be required to stop production due to an outbreak of COVID-19 on the film set or because an order from the Governor. Washington Filmworks will consider offering funding assistance for qualified expenditures incurred during this time but these costs must be estimated and approved during the application process.

	TOTAL BUDGET	WASHINGTON SPEND	Qualified Non-Resident Labor (If Applicable)
COVID-19 SHUTDOWN PAYROLL			
COVID-19 SHUTDOWN RENTALS / FEES			
TOTAL			

**WASHINGTON QUALIFIED IN-STATE SPEND**

Please list projected WASHINGTON expenditures by category. Only salaries/wages paid to Washington residents, and expenditures paid to Washington based companies, organizations, and individuals may be listed.

ABOVE THE LINE WAGES/SALARIES: \_\_\_\_\_

BELOW THE LINE WAGES/SALARIES: \_\_\_\_\_

HEALTH & RETIREMENT BENEFITS: \_\_\_\_\_

LODGING: \_\_\_\_\_

CATERING: \_\_\_\_\_

LOCATION FEES: \_\_\_\_\_

SET CONSTRUCTION: \_\_\_\_\_

STUDIO RENTAL: \_\_\_\_\_

QUALIFIED TRAVEL: \_\_\_\_\_

EQUIPMENT RENT/PURCH: \_\_\_\_\_

MISC. RENT/PURCH: \_\_\_\_\_

IN-STATE POST PRODUCTION: \_\_\_\_\_

EXPENDABLES: \_\_\_\_\_

CONTRACTED SERVICES: \_\_\_\_\_

OTHER: \_\_\_\_\_

**QUALIFIED NON-RESIDENT LABOR (IF APPLICABLE)**

Please include labor expenses for Qualified Non-Resident Labor ONLY. Please see the current Guidelines & Criteria found on our website for requirements surrounding Qualified Non-Resident labor.

BELOW THE LINE NON-RESIDENT WAGES/SALARIES: \_\_\_\_\_

HEALTH & RETIREMENT BENEFITS NON-RESIDENTS: \_\_\_\_\_

**FINANCING**

HAS THE JOB BEEN AWARDED BY THE ADVERTISING AGENCY? Yes No

IS THE PROJECT FINANCED BY WASHINGTON BASED CORPORATIONS,

COMPANIES AND / OR INVESTORS? YES NO

*If so, what percentage of the total financing is from a Washington based corporation or investor? \_\_\_\_\_*



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## **CERTIFYING SIGNATURE**

Washington Filmworks reserves the right to cancel funding if in its sole judgment it appears the production will not take place in a timely manner, or that the applicant has not shown good faith in its scheduling or made material misrepresentations in its application packet.

Applicant acknowledges that funding assistance is at the sole discretion of Washington Filmworks and the organization reserves the right to deny funding for any expense not directly related to in-state production costs or for any expense that is not a qualified expenditure as defined by the guidelines and criteria.

By signing this document you understand and agree to abide by the rules and criteria established by Washington Filmworks as well as the current COVID-19 Requirements defined by the State of Washington.

I hereby affirm that I am authorized to sign on behalf of the applicant production company described above and that all information contained on this application is true and correct, and further affirm that any items for which the applicant is seeking funding assistance are intended for the exclusive use as an integral part of the pre-production, production, or post-production filming activities described in the application.

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AUTHORIZED REPRESENTATIVE'S PRINTED NAME

TITLE

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AUTHORIZED REPRESENTATIVE'S SIGNATURE

DATE

This Washington Filmworks' Application for Funding Assistance is not complete until it has been signed and sent with all the necessary supporting documentation. Please send your complete package to: Washington Filmworks, 1122 E. Pike St. #1079, Seattle, Washington 98122 or email to [amy@washingtonfilmworks.org](mailto:amy@washingtonfilmworks.org).