



Company Information & References

Client Name: _____

Title of Project: _____ Est. Wrap Date: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Fax #: _____

Parent Company: _____ Letter of Guaranty: Yes No

Accountant: _____ Accountant Email: _____

Year Established: _____ What State? _____ Tax Exempt? Yes (Include Cert.) No

List of Persons Authorized to Issue Purchase Orders

Property Master or Set Decorator: _____

Phone #: _____ Email: _____

Industry References Only (Must Include Fax #)

Name: _____ Phone #: _____ Email: _____

Name: _____ Phone #: _____ Email: _____

Name: _____ Phone #: _____ Email: _____

Terms are NET 30 DAYS from date of invoice. Accounts more than 30 days past due may be closed and all new orders held until account is brought current. One and one-half (1-1/2) percent per month will be charged on all past due amounts.

I do hereby certify that all information stated on this form is true and correct and agree to all the terms and conditions of rentals and sales contained here and within other published policies of Independent Studio Services

Authorized Signature

Title

Date



Rating Inquiry on Entertainment Account

TO :

Bank Name: _____

Bank Address: _____

City: _____ State: _____ Zip Code: _____

Phone #: _____ Fax #: _____

FROM :

Company Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

RE :

Account #: _____

We have requested the extension of credit from Independent Studio Services. Please accept this memorandum as your authorization to provide all relevant information regarding our banking practices including the age of the account, average balances, delinquencies or checks written on insufficient funds.

We agree to hold the bank and its employees harmless for any injury or claim arising from the release of any confidential information. Thank you for your prompt response to this request. Please contact our office with any questions.

Authorized Signature Title Date

BANK USE ONLY

Date Account Opened: _____ Average High Balance: _____

Returned Checks: _____ Name of Bank Officer: _____

Comments: _____

Authorized Signature Title Date

Please send this inquiry back to accounts@issprops.com or fax to 818-951-2850 as soon as possible in order to complete their investigation of our credit application.



Purchase Order (PO) / Open Account Policy

ISS will grant open accounts to customers who have completed the Company's credit application process, and whose ratings fit the company's requirements. Open account status is not always available to a company formed solely for the production of a single project, unless there is a parent company with an existing open account willing to guarantee payment in writing.

Deposit Requirement

A security deposit will be required in an amount equal to your insurance deductible or the replacement value of the props being rented, whichever is less. Deposits will be refunded only once all props have been returned, and all loss/damage and open invoices have been paid.

For one week rentals: Deposit checks for one week rentals will be held in our accounting office until all props are returned and any loss/damage charges have been paid. If the rented props stay out beyond the original one week rental period, the check will be deposited, and you will be sent a refund check once your check has been cleared by the bank. For credit card deposits, your deposit amount will be verified, with all holds being dropped after the props have been returned and loss/ damage charges have been paid. If the rented props stay out longer than the original rental period, your credit card will be charged the deposit.

Deposits for all orders lasting longer than one week will be automatically deposited/charged.

Accepted Payment

ISS accepts, business checks, credit cards (American Express, MasterCard, Visa, Discover Card), cashier's checks and money orders. Personal checks will not be accepted. Returned checks are subject to a \$25.00 service fee

Loss & Damage

The Company reserves the right to bill your company loss charges for any props not returned to us by the agreed upon return date. Should the items be returned after a loss has been charged, we will credit the loss charges and bill you the rental rate for the additional time that the item(s) were out. The Company reserves the right to accept or reject the replacement or return of any previously lost or damaged item.

Purchase Orders

Unless we are notified by your company, a valid PO # must accompany any order placed, or we will not release the item(s). When an additional PO is required by your company for subsequent week rentals, it is the customer's responsibility to provide us with new PO #s.

Firearm Shipping Policy

ISS will not accept Production Company generated shipping labels for the shipping of Firearms or Blank Ammunition. Firearm shipping labels must be prepared in accordance with Federal, State and Local Laws. The Production Company must provide their Fed-Ex or UPS account number to ISS for shipment. Keep in mind UPS will not ship Machine Guns/NFA Firearms. If the production company does not have shipping account numbers, ISS will use our account number and invoice the shipping charge to the production company. If the company is being billed though an LLC, sales tax will be applied from that state if applicable, if tax exempt no tax will be added. For direct billed production companies, no sales tax will be applied.



or



Direct Bill:

We strongly suggest our customers know their company's purchase order policies and procedures beforehand to avoid delays on the release of your order(s).

Company Name: _____

Authorized Signature _____

Print Name _____

Date _____



Insurance Information

The following is information regarding the insurance requirements to be able to rent props / weapons from Independent Studio Services

INSURANCE REQUIREMENT

GENERAL LIABILITY - OCCURRENCE FORM

Minimum Acceptable Limits:

- Per Occurrence: **\$1,000,000**
- General Aggregate: **\$2,000,000**
- Fire Legal Liability: **\$100,000**
- Medical Payments: **\$5,000**

AUTOMOBILE

Minimum Acceptable Limit:

- Liability CSL: **\$1,000,000**

INLAND MARINE / PRODUCER'S PACKAGE

Minimum Acceptable Limit:

- Props, Sets, Wardrobe: **\$250,000**

Lower limits can be accommodated if the total value of all Props, Sets, and Wardrobe to be used on the project is less than \$250,000. The limit, however, must be greater than the total value of props, sets and wardrobe on overall production, not max per vendor.

Worker's Compensation

Workers Compensation insurance covering all individuals working on the project for which the props are rented.

Independent Studio Services must be included as **Additional Insured** for General Liability and as **Loss Payee** for Props, Sets, & Wardrobe.

Certificate Holder box should read:

**Independent Studio Services, LLC
9545 Wentworth St.
Sunland, CA 91040**

For weapons and related rentals, all certificates must state: **"Policies include coverage for weapons, ammunition, and related hazardous items."**