**THIS SUPPLEMENTAL APPLICATION IS ATTACHED TO AND FORMS A PART OF THE CAPMEDIA AND ENTERTAINMENT APPLICATION. IT IS SUBJECT TO THE SAME TERMS AND PROVISIONS INCLUDED IN THAT APPLICATION, INCLUDING THOSE CONCERNING REPRESENTATIONS AND MADE AND STATED FRAUD WARNINGS.**

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| Applicant Name:       |
| **(Proposed Named Insured)** |

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| broadcaster – radio / tv / satellite |

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| --- | --- |
| A.1  | Schedule of Stations: |

|  |  |  |  |
| --- | --- | --- | --- |
| **Call Letters** | **Simulcast Percent** | **Programming Format** | **Network Affiliations** |
|       |    % |       |       |
|       |    % |       |       |
|       |    % |       |       |
|       |    % |       |       |
|       |    % |       |       |

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| --- | --- |
| A.2 | Programming Types: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type** | **Percent** | **Type** | **Percent** | **Typ3** | **Percent** |
| Live |    % | Original – Local News |    % | Wire Service |    % |
| Network Originated |    % | Prerecorded |    % |  |  |
| Original – Excluding News |    % | Syndicate / Feature Service |    % | Total: | 100% |

|  |  |  |
| --- | --- | --- |
| A.3 | Does the Applicant produce or distribute any controversial programming? | [ ]  Yes [ ]  No |
| A.4 | Do reporters use hidden cameras or microphones? | [ ]  Yes [ ]  No |
| A.5 | Do reporters participate in “ride-alongs” with law enforcement, firefighters or EMT’s (or any emergency response vehicle or aircraft)? | [ ]  Yes [ ]  No |
| A.6 | Is there a procedure in place regarding the recycling of file footage, notes, tapes, or electronic versions thereof? | [ ]  Yes [ ]  No |
| A.7 | Is there a policy and procedure regarding the use of confidential sources? | [ ]  Yes [ ]  No |
| A.8 | Is there a policy and procedure regarding correction and retraction requests? | [ ]  Yes [ ]  No |
| A.9 | Does the Applicant employ “shock jocks”? | [ ]  Yes [ ]  No |
| A.10 | Are licensing fees paid to ASCAP, BMI, SESAC or other music licensing organizations? | [ ]  Yes [ ]  No |

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| cable tv system operations |

|  |  |
| --- | --- |
| B.1  | Schedule of Cable Systems: |

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **Name** | **Location****(City / State)** | **Years in Operation** | **# of Subscribers** | **Produce any Original Programming** | **Hours per Week** | **Programming Types** |
|       |       |       |       | [ ]  Yes [ ]  No |       |       |
|       |       |       |       | [ ]  Yes [ ]  No |       |       |
|       |       |       |       | [ ]  Yes [ ]  No |       |       |
|       |       |       |       | [ ]  Yes [ ]  No |       |       |
|       |       |       |       | [ ]  Yes [ ]  No |       |       |

|  |  |  |
| --- | --- | --- |
| B.2 | Does any cable television system listed above lease channels? | [ ]  Yes [ ]  No |
|  | If yes, is user required to indemnify the cable operator? | [ ]  Yes [ ]  No |
| B.3 | Does any cable television system listed above operate access channels? | [ ]  Yes [ ]  No |
|  | If yes, please describe: |

| **Access Channel** | **Access Procedure** | **Type of Programming Available for each Access Channel** | **# of Subscribers** | **Operating Budget**  | **Contributions / Grants** |
| --- | --- | --- | --- | --- | --- |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |
|       |       |       |       |       |       |

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| --- |
| online content provider |

|  |  |
| --- | --- |
| C.1 | Total Revenue generated from: |

|  |  |
| --- | --- |
| Content:  |       |
| Subscription services: |       |
| Advertising: |       |

|  |  |
| --- | --- |
| C.2 | Receipts generated from the following services: |

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Type** | **Percent** | **Type** | **Percent** | **Typ3** | **Percent** |
| Application Service Provider |    % | Educational Information |    % | Music |    % |
| Commercial Online Service |    % | Games |    % | News |    % |
| Content Provider |    % | Movies |    % | Web Hosting |    % |
| Other, please describe: |    % |  |  |

|  |  |
| --- | --- |
| C.3 | Please describe activities and services the Applicant wants to insure:       |
| C.4 | What type of content is disseminated by Applicant?       |
| C.5 | Please identify website addresses for each online content provider:      |
| C.6 | Does the Applicant’s website or online service collect personal information from children under 13 years of age, or is it directed to children under 13 years of age? | [ ]  Yes [ ]  No |
| C.7. | Does the Applicant comply with the Children’s Online Privacy Protection Act (COPPA)? | [ ]  Yes [ ]  No |
|  | Do you participate in an approved COPPA safe harbor program? | [ ]  Yes [ ]  No |
| C.8 | Does the Applicant web cast music? | [ ]  Yes [ ]  No |
|  | If yes, does the Applicant pay all required license fees to copyright owners? | [ ]  Yes [ ]  No |
| C.9 | Please identify percentage of content created by the Applicant: |    % |
| C.10 | Please identify sources of unoriginal content:       |
| C.11 | Are consents obtained for unoriginal content? | [ ]  Yes [ ]  No |
| C.12 | Are releases obtained for unoriginal content? | [ ]  Yes [ ]  No |
| C.13 | Who operates the Applicant’s web server?       |
| C.14 | Please describe the “take down” procedures in the event the Applicant is notified of infringing or offensive content:       |
| C.15 | Does the Applicant comply with the Digital Millennium Copyright Act (DMCA)? | [ ]  Yes [ ]  No |
| C.16 | Does the Applicant have procedures in place to regularly ensure compliance with the DMCA? | [ ]  Yes [ ]  No |
| C.17 | Does the Applicant consult with either in house counsel or outside legal counsel on the requirements of the DMCA? | [ ]  Yes [ ]  No |

|  |  |  |
| --- | --- | --- |
|  |  |       |
| **Signature of authorized representative of Applicant** |  | **Title** |
|       |  |       |
| **Type / Print name of authorized representative** |  | **Date** |