

JTIP for Film & Multimedia 2009 - NMAC 5.5.51

Revised FY15 7.1.14 (Physical Production Co.)

Film Crew Advancement Program (FCAP)

Application Part I – Exhibit A

The following production company is reque	sting JTIP for Film and Multimedia F	ilm Crew Advar	ncement Progr	am funds:	
Project Company Name:		Date:			
Project Title:		Project Type:			
Unit Production Manager (UPM) and/or Lin	e Producer (LP):				
UPM/LP Email:					
Local Production Office Address:					
City:	State:		Zip:		
Office Phone:	Office Fax:				
Production Accountant:	Email:				
Other Production Contact for Program/Title	· ·				
Production Contact's Email:		Phone:			
Date Local Offices opened:	Participating in Operation Soundstage (OSS) (please check): Yes No				
Company Parent/Affiliate/Studio (if appli	icable):				
Primary Contact*: *This person must be available after local NM offices have	Title:				
,		Fax:			
Address:					
		Zip:			
Additional Information:					
Has this company submitted the Film Tax F	Registration Form (please check):	□Yes	□No	☐ Not Applicable	
Dates of Pre-Production:	to	Total Days:			
Dates of Principal Photography:	to	Total Shoot Days:			
Dates of NM Wrap:	to	Total Days:			
Total budget (please include top budget sh *Note: if total budget is over \$2M additional requirements: & these crewmembers are not required to be program participated to the program participate of the program participated to t	B NM residents must be employed in key level pos pants or mentors Email <u>rochelle@nmfilm.com</u> for a	pproval.			
Crew/Company Size (actors/extras not incl	uded):				

nmfilm.com