



10 <sup>th</sup> Floor Musgrave Tov	wers	PO Box 5274
115 Musgrave Road,		Durban
Durban		4000
4001		
TEL: 031 003 9000		
KZNFilmFund@kznfilm	<u>.co.za</u> www.kwazulunatalfilm.co.za	
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# POST PRODUCTION FUNDING APPLICATION FORM The following Compulsory Documents must be submitted with the POST PRODUCTION application form.

- A one page letter of motivation
- A brief synopsis not to exceed one page
- A full itemised production budget in addition to the top sheet that is part of this application.
   Please highlight budget items to be spent in KZN (50% of total budget must be spent in KZN)
- A treatment or project outline (Narrative projects submit a director's treatment and Documentaries submit a detailed outline)
- A full script for feature projects and scripts for all episodes for TV series
- A comprehensive production schedule
- A comprehensive distribution and marketing plan with signed distribution Letter of Commitment and/or contract; from a reputable distributor which details the deal terms, i.e. duration (not more than 7 years), the distributors company details, the affected regions; and the distribution plan for recoupment of the full film investment. By distributors, KZNFilm refers to community, local and global free-to-air and DTT broadcasters, streamers, online platforms like YouTube, among others.

# OUR KINGDOM IS YOUR STAGE

#### KWAZULU NATAL FILM COMMISSION: POSTPOSTPRODUCTION FUNDING APPLICATION FORM

- A detailed financial plan with contract or commitment from other financers where applicable.
   Please include the details of various co-funders, and whether funding has been committed or pending.
  - A summary of the work experience and/or qualifications of the key creative team
  - Only filmmakers who either professionally or through training have produced, directed, or written a short film, documentary (Tier 1, Tier 2, Tier 3, Tier 4) are eligible to apply for production funding
  - A certified copy of the applicant's South African identity document (not older than 6 months)
  - Company Registration documents of the company applying for funding
  - Valid tax clearance PIN from SARS (If available )
  - Valid BEE certificate (If available )
  - Signed SBD 4 form

#### PLEASE NOTE:

- Non complaint applications will be given seven days (excluding weekends) to resubmit any outstanding documents or amend any errors on their application
- Summaries of CVs (2 pages) of the individuals making up the production team (writer, researcher, HoD's, Producer, Director, etc.) must be included
- Attach relevant copyright information
- Applications can be emailed to <u>KZNFilmFund@kznfilm.co.za</u> or hand delivered at KZN Film Offices in Durban. The entire proposal package must be submitted (including the application form and SBD forms)
- Current postproduction contract holders are not eligible to apply for postproduction funding while the current post production contract is still open with KZN Film
- Should the applicant or recipient not be contactable for 2 months at the given address or contact number from the date of receipt of the award letter, the grant will be cancelled.
   Should there be a change of contacts the onus is on the applicant to notify the KwaZulu Natal Film Commission.
- The KZN Film Commission will provide written acknowledgement of applications within 4 weeks of receipt of the application.
- No applications shall be returned to the applicant
- You may submit extra material, e.g. videos, photographs, etc. (if available)
- Should the applicant become the recipient of the funding, she/he will be the signatory of the contract and/or on behalf of his or her company.
- Please ensure that you complete the information as requested in the access and equity section below

## KWAZULU NATAL FILM COMMISSION: POSTPRODUCTION FUNDING APPLICATION FORM

# Proposals that do not adhere to the above criteria will be disqualified

# FILM FUND: APPLICATION FOR POST PRODUCTION FUNDING

A. TITLE OF PROJECT	В.
APPLICANT Name of	7
Applicant:	
Physical & Postal Address:	
(Please include Province)	
	_
ID Number	-
Home Telephone	-
Work Telephone:	_
Cell Phone:	
Fax:	
Email:	
C. COMPANY DETAILS	Ī
Company	
Name:	-
Company Registration Number	
Physical Business Address:	
Postal	
Address:	
(Please	
include	
Province)	-
	-
	-
Contact Name	_
Home Telephone	_
Work Telephone:	
Cell Phone:	
Fax:	_
Email:	

# KWAZULU NATAL FILM COMMISSION: POSTPOSTPRODUCTION FUNDING APPLICATION FORM

	Synopsis of Company Profile	Male	Female
Number of			
% of Sh	nared Equity owned by Blacks (African, Indian, Coloured)		
Number of Black (	(Africa, Indian, Coloured) employees in Senior/Executive		
	Management Positions		
Number	r of Black (African, Indian, Coloured) employees in Junior_		
	Management Positions		
	Temporary / Freelance employees		
		-	<u>'</u>
D. CATEGORY			
Feature	Total Running Time in Minutes		
Short			
TV Series			
Documentary			
Other – Specify:			
-			
Genre:			
Logline – A brief one			
line description of			
your story:	-		
your story:			
Proposed Shooting Form	mat (tick more than one if applicable)		
Proposed Shooting Form	mat (tick more than one if applicable) gibeta, DVCam, MiniDV, BetaSP, etc.)		
Proposed Shooting Form			
Proposed Shooting Form Video (HiDef, Dig			
Proposed Shooting Form Video (HiDef, Digital Other - specify	gibeta, DVCam, MiniDV, BetaSP, etc.)		
Proposed Shooting Form Video (HiDef, Dig Other - specify	pule	To:	
Proposed Shooting Form Video (HiDef, Dig Other - specify  E. ANTICIPATED SCHED	gibeta, DVCam, MiniDV, BetaSP, etc.)	To:	
Proposed Shooting Form Video (HiDef, Digital Other - specify  E. ANTICIPATED SCHEDING Pre-Production	pule	To:	
Proposed Shooting Form Video (HiDef, Dig Other - specify  E. ANTICIPATED SCHED  Pre-Production Production	pule	To:	
Proposed Shooting Form Video (HiDef, Digital Other - specify  E. ANTICIPATED SCHEDING Pre-Production	pule	To:	
Proposed Shooting Form Video (HiDef, Dig Other - specify  E. ANTICIPATED SCHEDE  Pre-Production Production	pule	To:	
Proposed Shooting Form Video (HiDef, Dig Other - specify  E. ANTICIPATED SCHEDI  Pre-Production Production	PULE From:	To:	
Proposed Shooting Form Video (HiDef, Dig Other - specify  E. ANTICIPATED SCHED  Pre-Production  Production  Post-Production	PULE From:	To:	
Proposed Shooting Form Video (HiDef, Digital Other - specify  E. ANTICIPATED SCHEDING  Pre-Production  Production  Post-Production  F. NON KZN COMPONE	PULE From:		team artists

#### KWAZULU NATAL FILM COMMISSION: POSTPRODUCTION FUNDING APPLICATION FORM

#### **G. PRINCIPAL CREATIVE TEAM**

	Name	Contact Number	Male	Female
Director:				
Producer:				
Writer:				

#### H. COPYRIGHT

The Applicant must be the originator of the script, treatment or outline concerned, or be the holder of copyright or have an option to the rights in any and all works on which the project is to be based.

	YES	NO
Original Idea?		
If no, attach full details on a separate sheet		
True Story / Real Life Characters?  If yes, attach full details on a separate sheet. If partially based on or drawn from a true story or involving real life characters, attach full details on a separate sheet.		
Underlying work/third party content?  If yes, attach full details on a separate sheet.		
Are you aware of any claims against your control or ownership of the rights?		

#### I. FINANCIAL PLAN SUMMARY

	COM ITTED		PENDING	ì
INVESTOR	AMOUNT	%	AMOUNT	%
KZN Film Commission			R	
TOTALS	R		R	

We declare that the information provided herei oplication is accurate.	n and in the supporting	docum	entation app	ended to thi
GNATURE(S)	DATE: _			
. ACCESS AND EQUITY				
erformance in this regard and comply with statu omplete the following details and include it with resented in aggregate and will not form part of y	your application. Statis	_		-
- Only the applicant to complete the below				
Project Title:				
Project Title:				
Project Title: Your Name: Date:				
Project Title:  Your Name:  Date:  Please tick with an X in the appropriate box.				
Project Title:  Your Name:  Date:  Please tick with an X in the appropriate box.  Are you male or female?				
Project Title:  Your Name:  Date:  Please tick with an X in the appropriate box.  Are you male or female?  Race?		M	F	
Project Title:Your Name:		M B	F W	
Project Title:  Your Name:  Date:  Please tick with an X in the appropriate box.  Are you male or female?  Race?  Do you have any physical disability?		M B Yes	F W No	

KWAZULU NATAL FILM COMMISSION: POSTPOSTPRODUCTION FUNDING APPLICATION FORM

## KWAZULU NATAL FILM COMMISSION: POSTPRODUCTION FUNDING APPLICATION FORM

# L. BUDGET (please attached detailed postproduction budget)

POSTPRODUCTION COSTS	
EDITOR	
ASSISTANT EDITOR	
DIT	
EDIT SUITE	
COMPOSER	
MUSIC	
ARCHIVE	
GRAPHICS	
VFX	
FINAL MIX	
VOICE OVER	
SUBTITLER AND EQUIPMENT	
LABORATORY PROCESSING	
TOTAL POSTPRODUCTION COSTS	
ADMINISTRATIVE EXPENSE	
PUBLICITY – TRAILER, POSTER	
INSURANCE	
CONTINGENCY	
OTHER COSTS	
TOTAL BELOW THE LINE	
TOTAL KZN EXPENDITURE	
TOTAL BUDGET	