

10th floor Musgrave Towers 115 Musgrave Road, Berea Durban, 4001

TEL: 031 003 9000

KZNFilmFund@kznfilm.co.za

www.kznfilm.co.za

https://funding.kznfilm.co.za/

PO Box 5274

Durban 4000

DEVELOPMENT FUNDING APPLICATION FORM *Only KZN applicants can access development funding.

The following compulsory documents must be submitted with the development application form.

- A one-page letter of motivation.
- A brief synopsis not to exceed one page.
- A treatment or project outline (Fiction projects submit a narrative treatment, Episode outlines for TV series and Documentaries submit a detailed outline).
- A completed screenplay (if available).
- A detailed development budget highlighting KZN expenditure per line item in addition to the top sheet in this application.
- A summarized curriculum vitae (2 pages) for the Writer and Producer.
- A detailed development schedule.
- A certified copy of the applicant's South African identity document (not older than 6 months)
- Proof of address (In the form of a municipal councilor's letter, a municipal bill in the applicant's name that is not older than 3 months or a signed lease agreement. Applicants
- that still live with their parents to attach an affidavit along with the municipal bill in their parents/guardian's name. KZN born applicants to submit an unabridged birth certificate)
- A tax clearance PIN from SARS (if available)

- Valid BEE certificate (if available)
- Company registration documents (if applying as a company)
- SBD 4 forms
- *A natural person whose primary province of residence is KZN and can provide proof of such residence.

 This also includes people born in KZN but residing elsewhere.

PLEASE NOTE:

- Non complaint applications will be given seven days (including weekends) to resubmit any outstanding documents or amend any errors on their application
- Summaries of CV's of the individuals making up the development team (co-writer, writer, researcher and producer etc.) must be included.
- Attach relevant copyright information.
- Applications must be submitted via the KZNFilm online funding portal: https://funding.kznfilm.co.za/
- No emailed or hand delivered proposals will be accepted.
- The entire proposal package must be submitted (including the application form and SBD forms) on the online application website
- Successful application will receive letters of award. In order to secure the grant, the recipient will be required to sign an agreement with KwaZulu-Natal Film Commission.
- Non-compliant projects that do not resubmit within 7 days will not be presented to the KZNFilm Film
 Fund Committee for consideration
- Applications deemed unsuccessful by the KZNFilm Film Fund Committee will receive letters of rejection.
- Current development contract holders are not eligible to apply for development funding while the current development contract is still open with KZNFilm
- The entire proposal package must be submitted (including the application form and SBD forms)
- Successful application will receive letters of award. In order to secure the grant, the recipient will be required to sign an contract with KwaZulu Natal Film Commission
- Unsuccessful applications will receive letters of rejection.
- Should the applicant or recipient not be contactable for 2 months or more at the given address or contact number from the date of receipt of the grant, the grant will be cancelled. Should there be a change of contacts, the onus is on the applicant to notify KZNFilm.

- No applications shall be returned to the applicant.
- Do not submit any extra material, e.g. videos, photographs, etc. (unless requested)
- Should the applicant become the recipient, she/he will be the signatory of the contract and/or on behalf of his / her company

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

OUR KINGDOM IS YOUR STAGE

FILM FUND: APPLICATION FOR DEVELOPMENT FUNDING

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

KWAZULU NATAL FILM COMMISSION: APPLICATION FOR DEVELOPMENT FUNDING **Synopsis of Company Profile** Male **Female** Number of permanent employees Number of permanent Black (African, Indian, Coloured) employees % of Shared Equity owned by Blacks (African, Indian, Coloured) Number of Black (Africa, Indian, Coloured) employees in Senior/Executive **Management Positions** Number of Black (African, Indian, Coloured) employees in Junior **Management Positions Temporary** or Freelance employees D. CATEGORY **Total Running Time in Minutes Feature** Short Documentary **TV Series** Other - Specify: Genre: Logline – A brief one line description of your story: **E. PRINCIPAL CREATIVE TEAM Contact Number** Male Female Name Producer: Writer: Researcher:

F. NON KZN COMPONENT

Script Editor:

Please specify any non-KZN component of the project (e.g. locations, investors, principal creative team, artists).

RWAZOLO NATAL FILM COMMISSION. AFFLICATION FOR DEVELOPMENT FONDING					
	l				

G. 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?		

H. FINANCIAL PLAN SUMMARY

	COMMITTED		PENI	PENDING		
INVESTOR	AMOUNT	%	AMOUNT	%		
KZN Film Commission			R			
TOTALS						

I.	KWAZULU NATAL FILM COMMISSION: APPLICATION FOR DEVELOPMENT FUNDING PLEASE BRIEFLY MENTION ANY OTHER (INCLUDING THIS ONE) PROJECT YOU ARE INVOLVED IN AND THE STATUS OF THE PROJECT. MENTION IF THIS PROJECT HAS BEEN OR IS CURRENTLY A RECEIPIENT OF ANY OTHER FUNDING.					
II.						

J. BUDGET

- It is not necessary to complete all classifications, only those relevant to your project and its particular stage of development.
- Please include a detailed development budget with KZN expenditure in addition to this top sheet, the KwaZulu Natal Film Commission reserves the right to negotiate amendments to this budget as a condition of the provision of funds
- KwaZulu Natal Film Commission does not fund retrospectively.

Category	Applicant's Contribution		KwaZulu Natal Film Commission's Investment	Other Funding	
	Cash	Deferred	Requested	Committed	
Option on Rights					
Purchase of Rights					
Writer's Fee					
Producer's Fee					
Script Editor's Fee					
Office overheads					
Research					
Legal Fees (if applicable)					
Other					
Sub-Totals					
TOTAL KZN EXPEND	ITURE:	•			

TOTAL DEVELOPMENT BUDGET REQUESTED:

K. ACCESS AND EQUITY

The KwaZulu Natal Film Commission aims to provide equitable access by South Africans to its funding initiative regardless of their racial background, culture, sex, physical or intellectual disability. In order to assist in monitoring performance in this regard and comply with statutory obligations it would be greatly appreciated if you would complete the following details and include it with your application. Statistics generated from this information will be presented in aggregate and will not form part of your application.

WRITER

Project Title:				
Your Name:				
Date:	Date of Birth:			
Please tick with an X in the appropriate box.				
Are you male or female?		М	F	
Race?		В	W	
Do you have any physical disability?		Yes	No	
Are you a South African citizen?		Yes	No	
Are you a South African resident?		Yes	No	
				е
Which Province are you from?				

e