

WB PYROTECHNICS QUESTIONNAIRE

Please provide answers to the questions below and email this form to Ty.Arnold@warnerbros.com, Amanda.Cooper@warnerbros.com and Corinne.Fletcher@warnerbros.com at least three (3) days **prior to filming**.

Named Insured (Production Company): _____

Title of Production: _____ Episode # (If applicable) _____

1. Date of Shoot: _____

2. Location of Shoot: _____

3. Provide a description of the activity. Please include the materials being used and size of fire/explosion.

4. Will the activity take place inside or outside? _____

5. Describe the fire safety in place to prevent injury to persons and damage to property.

6. Confirm all employees, cast, participants and the public will be kept at a safe distance from the activity. _____

7. Has a fire permit been obtained? _____

8. Will a fire safety officer be on set? _____

9. Who is the employer of record for each person involved the pyro activity? _____

10. Name and phone number of the Special Effects Coordinator _____