

FILM AND
TELEVISION
COMMISSION

Permit No. 16-070

1555 Palm Beach Lakes Blvd #900, West Palm Beach, FL 33401
PHONE: 561.233.1000 or 800.745.FILM * FAX: 561.233.3113 www.pbfilm.com

APPLICATION FOR USE OF COUNTY/MUNICIPAL/TAXING DISTRICT PROPERTY

The APPLICANT agrees to have a representative on site at all times with authority over filming director, crews and all other aspects of their operation and empowered to act for the APPLICANT

APPLICANT: Superprime

Representative/Title: David Egan/Location Manager

Address: 9950 Jefferson Blvd, Building 3, Culver City, CA 90291

Telephone: 305.992.3512

Fax: No Fax

Email: eganlocations@yahoo.com

Mobile: 305.992.3512

Project/Title: Gatorade

Local Address/Hotel/Phone: N/A

Of Room Nights (out of town crew/talent multiplied by nights stayed): 0

Type	<input type="checkbox"/>	1. Feature Film	<input type="checkbox"/>	3. Web Content	<input type="checkbox"/>	5. TV Series/Pilot	<input type="checkbox"/>	7. Film	<input type="checkbox"/>	9. Infomercial	<input type="checkbox"/>	11. Music Video
	<input checked="" type="checkbox"/>	2. Commercial	<input type="checkbox"/>	4. Stills	<input type="checkbox"/>	6. Documentary	<input type="checkbox"/>	8. Video	<input type="checkbox"/>	10. Other	<input type="checkbox"/>	12. Student Project

Dates of Filming: Prep Day-Thursdays, March 3, 2016

Times: 6:00am-7:00pm

Insurance On File/ Attached? Yes

Filming Day-Friday, March 4, 2016

Locations in Palm Beach County (Each MUNICIPALITY, COUNTY, or TAXING DISTRICT owned location must be identified separately):

The Delray Beach Tennis Center-201 W Atlantic Ave, Delray Beach, FL 33444

Nature of the Shoot: Production company is permitted to film their own talent practicing their sport at the Delray Beach Tennis Center main court, as well as waking up in a bedroom set on the 2nd Floor of the facility above the Pro Shop. Production company is permitted to have exclusive access to these areas during the date and times listed on the facility contract. Production company must not impede on any pedestrian/vehicular traffic, any normal activities, and cannot impact public use of any areas, unless otherwise approved by the Delray Beach Tennis Center. Production company agrees not to capture images of any persons/entities that indicate that they do not want to be filmed or included in the shoot. Production company is responsible for any and all damages caused to City of Delray Beach property as a result of this activity. Upon completion, crew shall remove all equipment, personal belongings and waste from the property and must leave the area in the same or better condition than prior to filming. Production company is not permitted to film on any unauthorized private property. Insurance attached is for public property and does not include insurance protection for any privately owned property or businesses.

See Attachment for a continuation of this section.

Identify any special MUNICIPALITY, COUNTY, or TAXING DISTRICT assistance required

<input checked="" type="checkbox"/>	Traffic Control	<input type="checkbox"/>	Street Closing	<input type="checkbox"/>	Shots of Police/Fire/Rescue Equipment
<input checked="" type="checkbox"/>	Parking-Two motorhomes, one tow generator, one camera truck, one production truck, three vans, one catering truck, and twenty-five crew cars are permitted to be parked. See Attachment.	<input type="checkbox"/>	# Parking Spaces Required	<input type="checkbox"/>	Other (explain)

If a shoot is cancelled, it is the sole responsibility of the Production Company to notify hired law enforcement. The Production Company will assume responsibility for compensation should the Production Company fail to deliver proper notification.

Identify all Unusual Activities:

N/A	<input type="checkbox"/>	Stunts	<input type="checkbox"/>	Animals	<input type="checkbox"/>	Explosives/Fireworks
	<input type="checkbox"/>	Fire Arms	<input type="checkbox"/>	Fires	<input type="checkbox"/>	Airplanes/Helicopters
	<input type="checkbox"/>	Vehicles	<input type="checkbox"/>	Watercraft	<input type="checkbox"/>	Other (explain)

The FTC shall require script approval for all scenes shot on Palm Beach County School Property. Additionally, films must not use the School name or contain scenes depicting alcohol, tobacco and drug use, nudity, or violence. Production Company shall contact Film Commission, not municipality staff, should any interruptions arise on or near the set.

Estimated Budget: \$175,000

Production Days: 2

Estimated Personnel Per Day: 60

Local PB County Crew: 12

By signing this application, the applicant acknowledges and agrees to the insurance and indemnification provisions: Evidence of insurance issued by companies satisfactory to the County, naming the County, any Municipality and Taxing District in which filming will be conducted as additional insureds, in the minimum amount of \$1,000,000 for general liability and vehicle liability, and workman's compensation insurance as required by Florida statutes, must be provided with the application. Some municipalities or activities may require additional insurance. The applicant agrees to indemnify and save harmless the County, each Municipality and Taxing District in which activities are conducted, their agents servants, and employees from and against all claims, liability, losses, and/or cause of any actions which may arise from any negligent act or omission of the applicant, its agent, servants, or employees. The applicant further agrees to indemnify save harmless and defend the County and each Municipality in which activities are conducted, their agents, servants, and employees from and against any claims, demands, or cause of action of whatsoever kind or nature arising out of any conduct or misconduct of the applicant not included in the paragraph above and for which the County or Municipality, their agent, servants, or employees are alleged to be liable. The applicant agrees to immediately pay the County, each Municipality, Taxing District for any services provided by them at their usual rates. The Film and Television Commission will provide coordination and advise the applicant of estimated costs. The applicant agrees to immediately cease production during all emergency situations including, but not limited to, hurricanes, actual or imminent as evidenced by declaration of a hurricane watch or advisory, floods, acts of God, acts of war, acts of public enemies or civil disturbances. Once a local state emergency (Local, State or Federal) is declared, this permit and all its attachments are hereby rescinded. The applicant must contact the Palm Beach County Film and Television Commission to reschedule the filming activity.

Production Company Applicant: Superprime	Date: Wednesday, March 2, 2016
By Name/Title: David Egan/Location Manager	Film Commission Approval Name/Title: Christy Andreoni/Production Director
Signature: On File	Signature:

If any situations or problems arise please contact the Palm Beach County Film & Television Commission.

Each Municipality, Taxing District and/or County Department	Contact Person
Delray Beach Tennis Center	Sharon Painter Ph: 561.265.0255 Email: sfgolf@aol.com
City of Delray Beach	Rosanne Dechicchio/Shondra Young Ph: 561.243.7190 Permit sent via email
City of Delray Beach Parks and Recreation (FYI)	Tim Simmons/Suzanne Fisher Davis Ph: 561.243.7251/7260 Permit sent via email
Delray Beach Police Department (FYI)	Captain Battiloro/Lt. Moschette Ph: 561.243.7888 Permit sent via email
City of Delray Beach Public Works and Parking (FYI)	Jim Schmitz/Clayton Gilbert Ph: 561.243.7334 Permit sent via email
Palm Beach County Public Affairs (FYI)	Lisa De La Rionda Ph: 561.355.2754 Email: Ldelario@pbcgov.org
Palm Beach County Film and Television Commission	Christy Andreoni Ph: 561.233.1000 Ph: 561.233.3113 Cell: 561.352.4499

Additional Requirements or Instructions: The production company will not impede on the public. If shooting or using private or leased property, or the signage of private or leased property, permission must be obtained from the property owner prior to the shoot.

Attachment to Superprime Permit No. 16-070

The following filming activity will take place starting with a prep day on Thursday, March 3 and a filming day on Friday, March 4, 2016 in between the hours of 6:00am-7:00pm at the Delray Beach Tennis Center-201 W Atlantic Ave, Delray Beach, FL 33444.

Nature of the Shoot (Continued from Page 1):

Permitted Equipment: Two cameras, tripod, six lights and a jib arm. All equipment is battery-powered, and does not need to be plugged-in to any outlets. Permitted Props: Tennis related items, bedroom set consisting of a queen size bed, drapes, and 2-3 cabinets. All equipment must be easily mobile. Production company will have a designated crew member to direct any pedestrians around equipment or prop set-ups. If any cables/cords/wires will be on the ground, they must be properly covered at all times to ensure safety. Production company is not permitted to film or have any talent, crew, equipment or props in any streets at any time. No stunts or special effects are permitted.

Identify Any Special Municipality, County, or Taxing District Assistance Required:

Parking Continued from Page 1: Production company must park all vehicles legally at all times. Parking is first-come, first serve. Parking is not permitted on any unauthorized private property. Parking fees are the responsibility of the production company. Production company is responsible for the security of their own vehicles. Emergency vehicles must be able to get through the streets at all times. Fire hydrants are not permitted to be blocked. Production company must place a sign in the dashboard of each vehicle that is a part of the production. See below for a copy of the sign.

Placard for Dashboards of On-Location Vehicles THIS VEHICLE IS PART OF A PERMITTED PRODUCTION!

Superprime is permitted to film footage for a Gatorade commercial starting with a prep day on Thursday, March 3 and a filming day on Friday, March 4, 2016 in between the hours of 6:00am-7:00pm. This vehicle is one of the production vehicles. Per the City of Delray Beach, the two-hour parking limit has been waived for this production. Fees are not waived. If you are with law enforcement please call the Palm Beach County Film & Television Commission at 561.233.1000 for a copy of the filming permit or if you have any questions.

Production Company Representative Name: (Please print) David Egan

Title: Location Manager

Production Company Representative Signature: On File

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER

Aon/Albert G. Ruben Co. of NY, Inc.
171 Madison Avenue, Suite 401
New York, NY 10016

Aon/Albert G. Ruben Insurance Services of CA
15303 Ventura Boulevard, Suite 1200
Sherman Oaks, CA 91403

Contact Name: John Galanis**Phone:** 212-463-5589**Email:** aonrubenwp@aon.com

James Pedrick

212-337-4356

Insurer's Affording Coverage**NAIC #****INSURED**

Superprime
9950 Jefferson Blvd, Building 3
Culver City, California 90291

INSURER A: Great Divide Insurance Company

INSURER B: Fireman's Fund Insurance Company

INSURER C:

INSURER D:

INSURER E:

INSURER F:

COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY			CPA1000004-21	01/01/16	01/01/17	
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY						EACH OCCURRENCE \$1,000,000
	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	X		\$0 Deductible			DAMAGE TO RENTED PREMISES (Ea occurrence) Excluded *
							PERSONAL & ADV INJURY \$1,000,000
							GENERAL AGGREGATE \$2,000,000
							PRODUCTS - COMP/OP AGG \$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						MEDICAL EXPENSE EXCLUDED
	POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC <input type="checkbox"/>						
A	AUTOMOBILE LIABILITY			CPA1000004-21	01/01/16	01/01/17	
	ANY AUTO			\$0 Deductible			COMBINED SINGLE LIMIT (Ea accident) \$1,000,000
	ALL OWNED AUTOS						BODILY INJURY (Per person) \$
	HIRED AUTOS	X					BODILY INJURY (Per accident) \$
	AUTO PHYS. DAM. **						PROPERTY DAMAGE (Per accident) \$
							AUTO PHYSICAL DAMAGE Included in Miscellaneous Equipment
A	<input checked="" type="checkbox"/> Umbrella Liab	X		CUA1000005-21	01/01/16	01/01/17	EACH OCCURRENCE \$25,000,000
	<input checked="" type="checkbox"/> Excess Liab			SSE00015203177	01/01/16	01/01/17	AGGREGATE \$25,000,000
	DEDUCTIBLE						\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC Statutory Limits Other
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N		NOT COVERED HEREUNDER			E.L. Each Accident \$
	If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				E.L. Disease - EA Employee \$
							E.L. Disease - Policy Limit \$
A	WORLDWIDE PRODUCTION PACKAGE			CPA1000004-21	01/01/16	01/01/17	
	MISCELLANEOUS EQUIPMENT**			\$0 Deductible			LIMIT DEDUCTIBLE
	PROPERTY OF OTHERS *						\$5,000,000 n/a
	PROPS, SETS & WARDROBE						\$5,000,000 n/a

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Omnicom Inc. - TBWA\Chiat\Day LA - The Kid, B0106.

Certificate holder is Additional Insured (by "Blanket" Endorsement) under General and Auto Liability but only with regard to claims arising from the negligence of the Named Insured and as required by written contract. Certificate Holder is Loss Payee as respects Miscellaneous Equipment (covered at Replacement Cost when required by contract), Props, Sets & Wardrobe, and Hired/Non-owned Auto Physical Damage. All coverage is subject to terms and conditions of policies of insurance. This Certificate does not amend, extend or alter the coverage afforded by the policies above.

CERTIFICATE HOLDER

Palm Beach County Board of County Commissioners and the
Palm Beach County Film and Television Commission
1555 Palm Beach Lakes Blvd. Suite 900
West Palm Beach, FL 33401

Cancellation

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon/Albert G. Ruben Insurance Services, Inc.

CERTIFICATE OF LIABILITY INSURANCE

Date (MM/DD/YYYY)
2/26/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

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PRODUCER	
Aon/Albert G. Ruben Co. of NY, Inc. 171 Madison Avenue, Suite 401 New York, NY 10016	Aon/Albert G. Ruben Insurance Services of CA 15303 Ventura Boulevard, Suite 1200 Sherman Oaks, CA 91403

Contact Name:	John Galanis	James Pedrick
Phone:	212-463-5589	212-337-4356

Email: aonrubenwp@aon.com

INSURED
Superprime
9950 Jefferson Blvd, Building 3
Culver City, California 90291

Insurer's Affording Coverage

NAIC #

INSURER A: Great Divide Insurance Company
INSURER B: Fireman's Fund Insurance Company

INSURER C:

INSURER D:

INSURER E:

INSURER F:

COVERAGES

CERTIFICATE NUMBER:

REVISION NUMBER:

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NSR LTR		TYPE OF INSURANCE		ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS SHOWN ARE AS REQUESTED				
A	GENERAL LIABILITY			X		CPA1000004-21 \$0 Deductible	01/01/16	01/01/17	LIMITS				
	X	COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$1,000,000			
		CLAIMS MADE <input checked="" type="checkbox"/> OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	Excluded *			
									PERSONAL & ADV INJURY	\$1,000,000			
									GENERAL AGGREGATE	\$2,000,000			
									PRODUCTS - COMP/OP AGG	\$1,000,000			
	GEN'L AGGREGATE LIMIT APPLIES PER:										MEDICAL EXPENSE	EXCLUDED	
<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC													
A	AUTOMOBILE LIABILITY			X		CPA1000004-21 \$0 Deductible	01/01/16	01/01/17	LIMITS				
	ANY AUTO	COMBINED SINGLE LIMIT (Ea accident)							\$1,000,000				
		BODILY INJURY (Per person)							\$				
		BODILY INJURY (Per accident)							\$				
		PROPERTY DAMAGE (Per accident)							\$				
		AUTO PHYSICAL DAMAGE							Included in Miscellaneous Equipment				
	ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS												
X	HIRED AUTOS	X	NON-OWNED AUTOS										
X	AUTO PHYS. DAM. **												
A B	X	Umbrella Liab	X	OCCUR		CUA1000005-21 SSE00015203177	01/01/16 01/01/16	01/01/17 01/01/17	LIMITS				
	X	Excess Liab		CLAIMS-MADE					EACH OCCURRENCE	\$25,000,000			
	DEDUCTIBLE								AGGREGATE	\$25,000,000			
										\$			
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			Y/N <input type="checkbox"/>					N/A	NOT COVERED HEREUNDER	<input type="checkbox"/> WC Statutory Limits	<input type="checkbox"/> Other	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)										E.L. Each Accident	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below										E.L. Disease - EA Employee	\$	
			E.L. Disease - Policy Limit		\$								
A	WORLDWIDE PRODUCTION PACKAGE					CPA1000004-21 \$0 Deductible	01/01/16	01/01/17	LIMITS				
	MISCELLANEOUS EQUIPMENT**									\$5,000,000	n/a		
	PROPERTY OF OTHERS *									\$5,000,000	n/a		
	PROPS, SETS & WARDROBE									\$5,000,000	n/a		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

Omnicom Inc. – TBWA\Chiat\Day LA - The Kid, B0106,

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CERTIFICATE HOLDER

Cancellation

Delray Beach Board of City Commissioners
100 N.W First Avenue
Delray Beach, FL 33444

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Aon/Albert G. Ruben Insurance Services, Inc.

STATEMENT OF EXEMPTION FROM WORKER'S COMPENSATION REQUIREMENT

TO: The Palm Beach County Film & Television Commission
Chuck Elder, Film Commissioner
1555 Palm Beach Lakes Boulevard, Suite 900
West Palm Beach, FL 33401
561.233.1000 / 800.745.3456 Phone
561.233.3113 Fax

By signing below, I affirm the following:

1. We do not employ more than three persons (including Corporate Officers, if any), and therefore are exempt from the Florida Workers Compensation Law.
2. We do not carry Florida Workers Compensation insurance.
3. Any persons that we may engage to work will have legal status as independent contractors, and not employees.
4. All such independent contractors have been advised that they are not covered for Workers Compensation insurance, and would be responsible for carrying their own such coverage if they desire.
5. If we should fall under Florida's requirement for carrying Workers Compensation insurance, we shall immediately obtain such coverage and provide evidence of it to you.

Accordingly, we hereby apply for exemption from Palm Beach County's requirement for carrying Workers Compensation insurance for permitting purposes.

Superprime

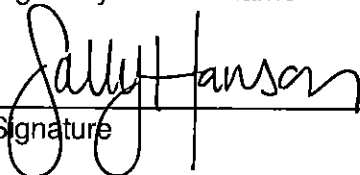
Company Name

9950 Jefferson Blvd. Bldg 3 Culver City, CA 90232

Company Street Address/City/State/Zip Code

Sally Hanson

Signatory Printed Name



Signature

Production Supervisor

Title

2/26/16

Date