



NEW PROJECT FORM

Please print clearly and email the completed form to Sam@TheSpecialistsLtd.com or FAX to 212-941-7654

PROJECT INFORMATION

Project Title: _____

Project Type: Feature: TV: Still Shoot: Student Project:
Commercial: Theatre: Other: _____

Prop Master/Customer: _____

Phone #: _____ E-Mail: _____

COMPANY INFORMATION

Company Name: _____

Billing Address: _____

Street Address

Suite/Unit #

City

State

ZIP Code

Shipping Address:

(Check here if same as above)

Street Address

Suite/Unit #

City

State

ZIP Code

Production Phone #: _____

Production FAX #: _____

Accounting Phone #: _____

Accounting FAX #: _____

FedEx Account #: _____

Tax Exempt #: _____

Please email or FAX Tax Exempt certificate along with this form