



STUDIO PROGRAM PLANNING OUTLINE

Important Things to Remember:

- 1. The Program Planning Outline (PPO) must be submitted seven days prior to the production.**
- 2. If less than the required number of QPTV Certified crew members report for the production, the session may be cancelled.**
- 3. Studio groups (talent/audience) are limited to twenty five (25) people.**
- 4. Smoking, drinking & eating are prohibited in the studio & control room. Water for talent is permitted.**
- 5. Studio production (taping) must be completed 30 minutes prior to the end of your scheduled reservation to allow for striking sets and clean-up.**

Today's Date: _____ Shoot Date: _____

Producer Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____
(Day) _____ (Evening) _____

PRODUCTION CREW LIST

TELEPHONE NUMBERS

Director: _____

Technical Director: _____

Camera: _____

Camera: _____

Camera: _____

Audio: _____

VTR: _____

Floor Manager: _____

CG/Teleprmt: _____

Lighting Director: _____



STUDIO SET-UP

Please describe the physical set-up for each show, that is, any use of furniture, set modules, props, hanging

logos, signs, etc. If there will be any musical instruments or other equipment brought in, please describe: (The use of any equipment, other than what is already in studio, must be approved by operations manager) Also, what is the format of each show, i.e., talk, music, demonstration, other?

SHOW #1 _____

SHOW #2 _____

SHOW #3 _____

SHOW #4 _____

How many cameras do you plan to use? _____

Please describe lighting arrangements, or attach plot:

Please describe audio set-up. How many and what type of mics will you be using?

Will you be using the teleprompter?

(please check)

Yes _____ No _____

(Use of teleprompter requires pre-arrangement with operations manager)

CONTROL ROOM

Do you plan to shoot in segments?

(please check)

Yes _____ No _____

(Shooting in segments to edit is not permitted in studio except by special permission by operations manager. If stopping tape is necessary during shoot to change costumes, etc., program must be assembled in "real time," using the edit controller in master control room.)

CG Title and ID Pages:

Pg#

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Do you plan to use video or audio roll ins?

(please check)

Yes _____ No _____

Please describe:

TIME SCHEDULE

Set/prep:	From: _____	To: _____
Rehearsal Time:	From: _____	To: _____
Shoot time:	From: _____	To: _____
Strike time:	From: _____	To: _____
Food time:	From: _____	To: _____

(Strike and food must be within the allotted studio time period.)

If you require use of the QPTV kitchen, please sign here: _____
(Producer is responsible for kitchen use. Kitchen must be left clean and orderly)

COMMENTS SECTION

PPO MUST BE SUBMITTED AT LEAST 7 DAYS PRIOR TO SHOOT DATE. YOUR APPOINTMENT IS NOT CONFIRMED UNTIL A PPO IS RECEIVED. THIS IS TO INSURE THAT ALL PRODUCERS HAVE ACCESS ON A FIRST-COME-FIRST-SERVED BASIS.

PLEASE READ AND SIGN LAST PAGE



STUDIO PROGRAM PLANNING OUTLINE (Continued)

I have obtained talent releases before production commences, I will obtain all approvals, clearances, licenses, permits and necessary insurance, etc., for the use of any including but not limited to approvals by broadcast stations, networks, sponsors, music licensing representatives, all persons appearing in or referred to in the program material, any other approvals that may be necessary to transmit program material over the QPTV cable channels in Queens.

It is agreed by the QPTV Certified Access Producer that in the event ownership/rights of the program produced by the QPTV Certified Access Producer is disputed by any other QPTV Certified Access Producer, then all matters pertaining to the dispute shall be forthwith submit to the American Arbitration Association or a QPTV designated arbitrator for the immediate and expeditious arbitration and the losing party shall pay all costs of arbitration. Until such dispute is resolved by arbitration or disputants. QPTV shall not cablecast the program in question.

It is further agreed that should a non QPTV Certified Access Producer dispute the ownership of any program then until resolution of the dispute, QPTV shall not cablecast the program in question.

I understand that false or misleading statements made in this application are grounds for forfeiture of the right to use QPTV equipment and facilities. After QPTV acceptance, this application is non-transferable.

I agree to be bound to the Rules & Procedures of QPTV. I agree to exercise reasonable care in use of the equipment & at all times keep the equipment in a safe place. I agree to pay the costs of any repair or replacement of equipment or materials resulting from misuse, loss, theft or vandalism while the equipment is in my possession or control and/or a crew member under my supervision. I agree to return the equipment at the time stated. I agree to pay Queens Public Communications Corporation ON DEMAND the cost for repairs in the check-out area, and I agree this represents the replacement value of the equipment.

AGREED TO AND ACCEPTED BY: _____
(QPTV Certified Access Producer)

NOTE: ALL PROGRAM CREDITS MUST INCLUDE THE FOLLOWING

1. QPTV is not responsible for the content of this program
2. Produced through the facilities of the Queens Public Access Television
Flushing, NY