

m ss ng p eces

PROPERTY RELEASE

Date: November 8th 2019

To: DuPage County Historical Museum

For valuable consideration received, you hereby grant to the undersigned permission to go upon your property located at:

102 E Wesley St. Wheaton, IL 60187

ADDRESS

for the purpose of photographing certain scenes in connection with a motion picture to be produced by the undersigned, tentatively entitled:

Project Forward

PROJECT NAME

You agree that we may have the right of use, possession and access to said property as may be necessary for such purpose.

We agree to use reasonable care to prevent damage to your property and to remove any and all property, which we may have placed upon your premises in connection with our use thereof. We agree to restore said property as nearly as practicable to its original condition at the time of our taking possession thereof, reasonable use thereof excepted. You hereby give and grant to us the right to photograph said property and any part thereof, and to exhibit and distribute photographs thereof in connection with such photoplay or in connection with the exploitation and advertising thereof.

For the right of use of your property we agree to you as follows:

\$1250.00

DOLLAR AMOUNT

Covers one half-day prep on _____ and one shoot day on November 10th, 2019

We hereby agree to indemnify you and hold you harmless from any claims and demands of any person or persons arising out of or based upon personal injuries and/or death suffered by such person or persons, resulting directly from any act of negligence on our part while we are engaged in the photographing of said photoplay upon your premises.

Starting date on or about: November 10th 2019

Approved and Accepted By:

Signature: _____

Name: H. Michael J. Baran

Signature: _____

Something Ideal, Inc.
Producing Company

Ari Kuschnir, Founder & Executive
Producer

SS # or TAX ID: _____

Print Name: _____

m ss ng p eces
836 Manhattan Avenue
Brooklyn, NY 11222
646 290 7931

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The undersigned has inspected the premises after completion of your use thereof in accordance with the foregoing grant, and the undersigned hereby acknowledges and agrees that said premises have been satisfactorily restored to the prior condition in accordance with the above agreement.

By: _____

Print: _____

Date: _____

Included as part of Agreement Dated November 8, 2019 by and between Missing Pieces ("Company") and Wheaton Park District D/B/A DuPage County Historical Museum ("Park District")

The Agreement is for filming on November 10, 2019 from 6A to 10A. Room will be available from 5:30A to 10:30A (though at 10A Park District staff will begin resetting room). Rental for four hours is \$1,000. Additionally, a \$250 deposit required. All funds are expected before filming begins.

Indemnification

To the fullest extent permitted by law, the Company shall indemnify and hold harmless the Park District and its officers, officials, employees, volunteers and agents from and against all claims, damages, losses and expenses, including but not limited to legal fees (attorney's and paralegals' fees and court costs), arising out of, incidental to, resulting from or in connection with Vendor's performance of its obligations under this Contract, provided that any such claim, damage, loss or expense (i) is attributable to bodily injury, sickness, disease or death, or injury to or destruction of tangible property, and (ii) is caused in whole or in part by any negligent or wrongful act or omission of the Company, any Subcontractor, anyone directly or indirectly employed by any of them or anyone for whose acts any of them may be liable, regardless of whether or not it is caused in part by a party indemnified hereunder. Such obligation shall not be construed to negate, abridge, or otherwise reduce any other right or obligation of indemnity which would otherwise exist as to any party or person described in this Paragraph. Company shall similarly protect, indemnify and hold and save harmless the Park District, its officers, officials, employees, volunteers and agents against and from any and all claims, costs, causes, actions and expenses including but not limited to legal fees, incurred by reason of Company's breach of any of its obligations under, or Company's default of, any provision of the Contract.

Museum Policies for Rentals

- The Park District does not assume liability for property lost or stolen on Park District property or for personal injuries sustained on the premises. The Company agrees to indemnify and hold the Park District harmless from all claims, suits, judgments or damages arising out of any such property loss or personal injury. A certificate of insurance naming the Wheaton Park District as "Additional Insured" is required prior to the approval of rental requests. The insurance coverage shall be Public Liability Insurance in an amount not less than \$1,000,000.00 or Occurrence and Property Damage Insurance in an amount not less than \$50,000.00. The Certificate of Insurance needs to be on file with the Park District prior to the rental. Company must provide all additional insurance certificates with Wheaton Park District named as an additional insured on the insurance certificate from any and all participating Caterers, Musicians, Rental Companies, Bartenders, or any other persons, firms, or entities hired by the Company. All forms of Certificates of Insurance are subject to approval by the Wheaton Park District.
- All food and beverage needs should be discussed with Park District staff at time of contract signing. Details to be worked out with Park District staff as arise. Food and beverage are permitted in the Museum Auditorium and predesignated spots only. Absolutely no food allowed in exhibit galleries.
- Any outside vendors bringing, delivering, setting up food into the Property brought in by Company shall provide a Certificate of Insurance (see Certificate of Insurance information above). Chafing dishes, metal hotboxes and sterno may be used in locations listed herein. Candles with enclosed flames are not be allowed at the Museum. Any other cooking equipment must be approved by Park District. Transportation of supplies is the responsibility of the caterer or renter. Equipment for material and supply transportation is the responsibility of the caterer or renter; dollies and/or wagons will not be supplied by the

event location.

- A security deposit of \$250 is required for ALL events. All security deposits will be refunded within three (3) weeks after the event provided no damage occurred, no excessive clean-up was required and all policies were followed. Any decision to partially retain or not to return the security deposit is at the sole discretion of Park District Staff.
- The facility must be left in the condition that it was found. Sprinkles, confetti decorations, bubbles, red rose petals, candles, rice, bird seed and balloons are not permitted on the Museum grounds. Charges will be assessed for any additional clean-up or damages. Decorations must be freestanding and cannot be affixed to walls, windows, doors, tables, cabinets, stage, or light fixtures. In order to preserve the historic architecture and ambient environment within and outside the Museum, physical alterations, adjustments, or repairs to the DuPage County Historical Museum property by the Company/Caterer or guest are prohibited. **Company/Caterer and guests are prohibited from the attachment, fastening or affixing of any materials to any of its buildings** (exterior or interior), trees landscape materials, or ancillary site features. (i.e. signs, railings, lampposts, etc.) This includes no attachment or fastening or any kind via nailing, drilling, boring, screwing, taping, stapling, bolting, pinning, chaining, tacking, clipping or wiring. Should this occur, reimbursement costs for labor and materials to complete the necessary repair(s) or replacement(s), at the discretion of Park District staff, shall be charged to the person(s)/organization securing the rental. Candles or any open flames are PROHIBITED in the MUSEUM, including birthday candles. DCHM is a non-smoking facility. Flash photography, video and other electronic equipment is prohibited in the Museum Exhibit galleries on first floor unless previously arranged with Museum Curator.
- The Company agrees to be responsible for any damage done by the Company, his or her guests, members, employees or other agents under the Company's control.
- Trash pickup is the responsibility of the Company. Charges will be assessed for any additional clean-up times if garbage is not located in trash receptacles.

AGREED:

Wheaton Park District

By:  (signature)

 (print name)

Date: 11/8/19

Client

By:  (signature)

VINH Lu (print name)

Date: Nov 8th 2019

Thank you for contacting DuPage County Historical Museum, we look forward to your event!



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/06/2019

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 Marsh USA Inc. 633 W Fifth Street Los Angeles, CA 90071, USA WalMart Inc. / FCB (CHICAGO)	CONTACT NAME: Entertainment Practice	
	PHONE (A/C, No, Ext): 213-624-5555	FAX (A/C, No): 213-346-5922
	EMAIL ADDRESS: adwrap@marsh.com	
	INSURER(S) AFFORDING COVERAGE	
	INSURER A: Fireman's Fund Insurance Company	NAIC # 21873
INSURED M ss ng P eces 11751 Mississippi Ave, Suite 130 Los Angeles, CA 90025	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	
	INSURER G:	

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 <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> _____ <input type="checkbox"/> _____ GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC			XXC 8051 6694	5/1/19	5/1/20	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> _____ <input checked="" type="checkbox"/> NOHA PHYS. DMG			XXC 8051 6694 MPT 0720 7127	5/1/19 5/1/19	5/1/20 5/1/20	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident) PHYSICAL DAMAGE \$ 2,000,000
A	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input checked="" type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$			XAE 000 5823 7934	5/1/19	5/1/20	EACH OCCURRENCE \$ 19,000,000 AGGREGATE \$ 19,000,000
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (MANDATORY IN NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/>	N/A	Not Included	N/A	N/A	<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT
A	PROPS, SETS & WARDROBE MISCELLANEOUS EQUIPMENT THIRD PARTY PROPERTY DAMAGE			MPT 0720 7127	5/1/19	5/1/20	LIMIT - \$5,000,000 DED: \$25,000 LIMIT - \$5,000,000 DED: \$25,000 LIMIT - \$1,000,000 DED: \$25,000

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

Certificate applies for Commercials/Photo Shoots produced for Walmart Inc. Certificate Holder is included as Additional Insured and/or Loss Payee as respects operations of the Named Insured and as required by contract. *Policy is Primary & Non-Contributory and Waiver of Subrogation applies *All Risks, Worldwide and Replacement Costs on Property and Misc Equipment. Policy does not include unattended vehicle exclusion.

Coverage applies to production entitled: "Project Forward"; Job No.: NA; Client: Walmart.

CERTIFICATE HOLDER

CANCELLATION

Wheaton Park District 102 E Wesley St Wheaton, IL 60187	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 <i>Paul Evans</i>