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New York, NY 10036  
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**Loan-out Start Form**  
Employer: New C.A.P.S., LLC, FEIN: 27-4217142

Production company			Hire state	Work state	Account	Date of birth
Loan-out name			Project			
Loan-out address			Federal ID #		Start Date	
Employee FSO name		Minor? <input type="checkbox"/>	Employee SS #			
Mailing address			Union	Occupation description		OCC code
City			Agent authorization attached? Yes <input type="checkbox"/> No <input type="checkbox"/>			Schedule
State	Zip	Loan-out phone number		Email		
State incorporated	Date incorporated	State entity #	<input type="checkbox"/> US corporation <input type="checkbox"/> US LLC taxed as a corporation <input type="checkbox"/> Non-US company: country _____			
California employer account (edd) # (if applicable)						
Please complete per loan-out's schedule:			If LLC, attach IRS acceptance letter. We will not process payroll for LLCs that don't have a corporation status.			
Daily <input type="checkbox"/> Weekly <input type="checkbox"/> On-call <input type="checkbox"/>		Studio rate	Guar hours	Distant rate	Guar hours	Account
Hourly rate						
Weekly rate						
6th day						
7th day						
Idle 6th day						
Idle 7th day						
Kit Rental						
Car Allowance						
Meal Allowance						
Meal penalty						
Signature of authorized officer			Date	Production approval		Date

By signing this form, I authorize the employer, or its services or payroll provider, to take deductions from my earnings (regardless of payment method) to adjust previous overpayments if and when said overpayments may occur.  
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