



OneBeacon Insurance Company

c/o First Media

4350 Shawnee Mission Pkwy #350 – Fairway, KS 66205

800-753-7545/913-384-4800 Fax: 913-384-4822 www.firstmediainc.com

MEDIA ADVANTAGE POLICY® Cable Television Operator Supplement

1. Name of **Applicant**: _____

2. Identify all subsidiaries, including trade names, and joint ventures to be insured by the policy:

3. **Cable Systems** — Please attach separate sheet, if necessary.

System and Location	Years in Operation	Number of Access Channels	Number of Subscribers	Annual Revenues	Geographic Regions Served

4. **Originated Programming:**

Please identify programming produced by **Applicant** and identify the cable system through which it is broadcast _____

Total hours of original programming per week _____

Do cable systems share original programming? Yes No

If "yes," to above, please identify percentage of duplication _____%

Is original programming syndicated? Yes No

Does the **Applicant** produce local news coverage? Yes No

If "yes," indicate percentage: _____%

5. **Access Channels**

Hours of daily broadcasts by access channels _____

Please describe access procedure _____

6. Leased Channels

Please identify percentage of leased channels _____%

Is the user required to execute a written hold harmless agreement and indemnify the cable operator?

Yes No

7. Loss Prevention

Do program producers comply with music licensing and other requirements to protect the intellectual property rights of third parties?

Yes No

Do local news reporters engage in investigative or undercover reporting?

Yes No

Is a procedure in place for responding to complaints?

Yes No

Are infomercials or other paid advertisements broadcast over the **Applicant's** cable system(s)?

Yes No

If **"yes,"** do the vendors execute hold-harmless agreements?

Yes No

Do in-house advertising departments utilize limitation of liability clauses?

Yes No

8. Attachments

Please submit the following information to complete your Application:

- a Current corporate annual report or financial statement;
- a List of stations carried on each cable system and program schedule;
- a Promotional materials regarding the services or operations of **Applicant**;
- a Copy of standard hold harmless agreements utilized with vendors, program producers and advertisers;
- a Copy of standard channel use or lease agreement;
- a If new operation, resumes of principals.