Application form for reimbursement of recording cost
according to law no. 110/2016

*Please fill in the relevant information for each phonogram which is subject to this application. Special attention is drawn to section 2 of the application form where the applicant may authorize the Ministry of Industry and Innovation to obtain financial information from STEF and the Director of Customs. Otherwise the applicants shall hand in declarations from those agencies on the financial status of the producer with them.*

1. **Applicant**

|  |  |
| --- | --- |
| Name:  | ID number:  |
| Address:  | Phone number:  |
| E-mail address:  |
| Bank information:  |
| The amount of reimbursement the applicant has received in the last three years:  |

1. **Financial status with STEF and the Director of Customs**

|  |
| --- |
|[ ]  The producer is not behind on royalties with STEF and authorizes the Ministry of Industry and Innovation to obtain information from STEF on his financial status with the agency |
|[ ]  The producer is not behind on public dues and fees and authorizes the Ministry of Industry and Innovation to obtain information from the Director of Customs on his financial status with the Customs |
|[ ]  Information regarding the producer’s financial status with STEF and the Director of Customs accompany the application |

1. **The phonograms**

|  |  |  |
| --- | --- | --- |
| All phonograms were released at the same time | Yes [ ]  | No [ ]  |
| Date of release: |   |
| Place of release |   |

*If all of the phonograms were released at the same time you don’t have to fill in the date and place of release in the forms below.*

|  |  |  |  |
| --- | --- | --- | --- |
| **Phonogram 1**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 2**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 3**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 4**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Phonogram 5**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 6**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 7**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Phonogram 8**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 9**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Phonogram 10**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 11**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 12**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 13**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 14**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |
| **Phonogram 15**ISRC:  | Duration:  | Release date:  | Place of release:  |
| Performer: Other performers:  |

1. **Amount to be reimbursed**

|  |  |
| --- | --- |
| Total amount of hourly studio rates | ISK.  |
| Post production: | ISK.  |
| Wage expenses incurred during the recording for hired performers, producers, engineers or studio personnel | ISK.  |

1. **Public grants**

|  |  |  |
| --- | --- | --- |
| Has the producer received other public grants for the recording and releasing of the phonograms? | Yes [ ]  | No [ ]  |
| If yes, please specify which costs the grant covered and the amount of the grant.   |

1. **Accompanying documents**

*Please list the documents that accompany this application*

|  |
| --- |
| **Date:** **Place:**  |
| **Signature:** |