

HOW TO SUBMIT YOUR LICENSED PROGRAMME

- Draft your synopsis and other required creative information and include the **link** to the programme for viewing by the SABC
- Complete the required submission forms
- PDF the submission as one document and email the PDF to the following Programme Buyers:

SABC 1 & SAB2 - Futhi Ngubane: ngubanen01@sabc.co.za

SABC 3 - Violet Sekhibidu : sekhibiduv@sabc.co.za

- If accepted or more material is required for viewing the Programme Buyer will contact the producer. If your project is rejected, you will be advised by the Programme Buyer

• BE ADVISED THAT UNSUCCESSFUL SUBMISSIONS WILL BE DISCARDED AFTER VIEWING

- **PLEASE ALL ENSURE ALL YOUR CONTACT DETAILS IS INCLUDED IN YOUR SUBMISSION**
- **ANY LINKS THAT HAVE TIME BASED ACCESS AND OR PASSWORDS WOULD NEED TO BE SET A 60 DAYS OR MORE**

All enquiries can be directed to: David Makubyane:
makubyanede@sabc.co.za

LICENSING PROPOSAL SUBMISSION FORM

LICENSING:		<i>Genre:</i>		<i>Channel:</i>	
<i>Working Title:</i>					
<i>Company Name:</i>					
<i>Contact Name:</i>		<i>Position:</i>			
<i>Telephone :</i>		<i>Cell:</i>			
<i>e-mail:</i>		<i>Fax:</i>			
<i>Postal Address:</i>					
<i>Street Address:</i>					
PROPOSAL SYNOPSIS:					
<i>No. of Episodes:</i>		<i>Minutes per Episode:</i>		<i>Total Minutes:</i>	
<i>Cost per Episode:</i>			<i>Total Budget:</i>		
<i>Cost per Minute:</i>					
SYNOPSIS OF COMPANY PROFILE:					
(A) Number of Permanent Employees					
(B) Number of Permanent Black (African, Indian, Coloured) Male Employees					
(C) Number of Permanent Black (African, Indian, Coloured) Female Employees					
(D) % of Shareholders Equity owned by Black Males (African, Indian, Coloured)					
(E) % of Shareholders Equity owned by Black Females (African, Indian, Coloured)					
(F) % of Shareholders Equity owned by White Male					
(G) % of Shareholders Equity owned by White Female					
(H) Number of Black Creatives (African, Indian, Coloured)					
(I) Number of disabled employees					
<i>Company Registration Number:</i>					
<i>VAT Registration Number:</i>					
<i>Name:</i>			<i>Date:</i>		
<i>Signature:</i>			<i>Receipt Number:</i>		

PROPOSAL SUBMISSION AGREEMENT

1. OWNER OF NEW IDEA

SABC will receive only submitted material that is embodied in written form in hard copy. Couriered, mailed, facsimiles and e-mail submissions will not be considered. SABC will consider your submission only at your request and only with your assurance that to the best of your knowledge you are the sole originator of the idea and that you have the legal right to submit it to SABC for evaluation.

2. CONCEPTION BY SABC

SABC and its employees have many ideas of their own for the development of programs, some of which may be similar to yours. An idea that is new to you may be old to SABC, or similar, or identical ideas may be conceived independently. Accordingly, you hereby waive any claim that SABC misappropriated any ideas or portions of your submission in any activities in which SABC may engage in the future.

3. DISCLOSURE NOT CONFIDENTIAL

You acknowledge that SABC may disclose the idea to its employees, including freelance readers, to determine the value of the idea to the channel. It is understood that no confidential relationship is entered into by any reason of the consideration of your submission to SABC or by reason of any oral discussions between the SABC and yourself. The SABC however undertakes not to share your proposals with other independent producers.

4. MODIFICATION

The foregoing conditions may not be modified or waived except in writing signed by an officer of SABC.

5. LITIGATION

The SABC will not consider proposals from companies or individuals who are litigants against the corporation until those matters are finalized. It will still remain the SABC's right to determine whether or not to do business with such entities in future.

6. TERM

This release shall be valid for a period of five (5) years from the date of signature and shall apply to any further ideas submitted by you to SABC during such Term.

I HAVE READ THE SUBMISSION AGREEMENT, AND I AGREE TO THE CONDITIONS CONTAINED THEREIN:

Print Name

Signature

Date:

IDENTIFICATION LABEL

(TO BE STUCK ON OUTSIDE OF ENVELOPE)

<i>License</i>		<i>Genre:</i>		<i>Channel:</i>	
<i>Receipt no:</i>					
<i>Working title:</i>					
<i>Company name:</i>					
<i>Co-production company</i> <i>(if applicable)</i>					
<i>Contact name:</i>			<i>Position:</i>		
<i>Telephone:</i>			<i>Cell:</i>		
<i>e-mail:</i>			<i>Fax:</i>		
<i>Postal address:</i>					