

## FORM B TENNESSEE DECLARATION OF RESIDENCY

## **Tennessee Film, Entertainment & Music Commission**

312 Rosa L. Parks Avenue, Nashville, TN 37243 (615) 741-3456 Fax: (615) 741-5554 tn.film@tn.gov

The purpose of this form is to verify information for Tennessee residents hired as service providers (including cast, crew, and other individuals providing production-related services) in accordance with the TFEMC Incentive Guidelines. To be considered an eligible expenditure, all production companies must have each Tennessee resident complete this form AND attach a copy of proof of residency. All information MUST be clearly demonstrated.

PERSONAL INFORMATION  Name	Position on Project (i.e. Grip, Driver, Extra, etc.)	Title of Project
(For minors only) Parent or Guardian's Name	SS#	TN Driver's License # / ID # (minors should list parent or guardian's license #)
CONTACT INFORMATION		
E-mail Address	Phone	Fax
Address	City, State, Zip	Phone
ADDITIONAL INFORMATION  Are you presently a resident of Tennessee?  Do you anticipate changing your residency sta	atus during the time that you are expected to wo	☐ YES ☐ NO
form of a current, permanent To	services for this project must p ennessee driver's license or Sta epted. A minor would need to pr	te issued identification (ID Only).
I declare under penalty of perjury	that the above information is true,	correct and complete.
Signature	Date	

Date

(FOR MINORS ONLY) Parent or Guardian's Signature