UNITED SCENIC ARTISTS • LOCAL USA 829 • IATSE

STANDARD DESIGN AGREEMENT 2024-2026: RENTALS, SALES, AND DONATIONS

This Agreement must be signed by Employer and Designer/Assistant.
Send Cover Sheet and Rider, if any, to USA 829 for approval, along with ***separate checks for Pension and Welfare.***
The Designer will not furnish any designs until the Agreement has been executed by the Union.

AGREEMENT is made, for the services of the Designer named, pursuant to the terms and conditions set forth in the **United Scenic Artists, Local USA 829 Standard Design Agreement (2024-2026)** covering the employment of Scenic, Costume, Lighting, Sound, and Projection Designers, and each provision shall be a part of this Agreement as though set forth herein at length. Additional terms may be placed in a Rider attached to this Agreement and shall be deemed part hereof. This Agreement is limited to the production listed below. It is not precedential or citable in any proceeding other than one to enforce this Agreement and does not bind or obligate the Employer in any way beyond the scope of this project. This Agreement does not constitute the recognition by the Employer of United Scenic Artists, Local USA 829, IATSE for the purposes of collective bargaining.

DATE OF RENTAL OR SALE AGREEMENT: _____ **DATE OF FIRST PUBLIC PERFORMANCE:** _____

NAME OF ORIGINAL EMPLOYER / PRODUCER: _____ **EIN:** _____

NAME OF RENTING OR ACQUIRING COMPANY: _____ **EIN:** _____

COMPANY CONTACT: _____ **CONTACT PHONE:** _____ **CONTACT EMAIL:** _____

NAME OF DESIGNER: _____ **NAME OF PRODUCTION:** _____

DESIGN CATEGORY: ☐ **SCENIC** ☐ **COSTUME** ☐ **LIGHTING** ☐ **SOUND** ☐ **PROJECTION**

1. RENTAL: The designs have been rented to _____ as of _____.

The Designer will be paid $_____ which meets or exceeds 20% of the Rental Fee of $_____ or 15% of the original design fee of $_____, whichever is greater. Designer has been scheduled for_____ days of Additional Work to remount the Rental at the Daily Rate of $_____, including residence at the Renting Company from _____ to _____.

Design Licensing Fee: $ _____
Daily Rate Total: $ _____
TOTAL (Fee + Daily Rate): $ _____

2. SALE: The designs have been sold to _____ as of _____.

The Designer will be paid $_____ which meets or exceeds 20% of the Sale Price of $_____ or 20% of the original design fee of $_____, whichever is greater. Designer has been scheduled for_____ days of Additional Work to remount the Sale at the Daily Rate of $_____, including residence at the Company Sold To from _____ to _____.

Design Licensing Fee: $ _____
Daily Rate Total: $ _____
TOTAL (Fee + Daily Rate): $ _____

Designer will receive an AWC of $_____ per week, starting with the date of the 1st Public Performance, to the Closing Date: _____.

3. DONATION: The designs have been donated to _____ as of _____.

Designer will receive an AWC of $_____ per week, starting with the date of the 1st Public Performance, to the Closing Date: _____.

TRUST FUNDS: It is further understood that the Employer, in order to provide certain **Pension and Health benefits,** shall make a contribution of $_____ equivalent to **10%** of gross compensation to the ***United Scenic Artists Pension Fund*** and, for Health, a contribution of $ _____ equivalent to **12%** of gross compensation to the ***IATSE National Benefit Funds***, and shall be bound by the Agreements and Declarations of Trust governing those Funds.

Separate checks for the full amounts should be attached to this document and sent to the Regional Union Office appropriate for the Employer's location.

☐ NATIONAL/EASTERN	☐ NEW ENGLAND	☐ MID-ATLANTIC	☐ CENTRAL REGION	☐ WESTERN REGION
37 West 26th St., 9th Floor	292 Newbury St., Box 380	37 West 26th St., 9th Floor	111 N. Wabash Ave., #2107	3400 W. Riverside Dr., Ste. 605
New York, NY 10010	Boston, MA 02115	New York, NY 10010	Chicago, IL 60602	Burbank, CA 91505
212-581-0300	401-369-0460	917-408-6152	312-857-0829	323-965-0957

INSURANCE: Employer will indemnify, defend, save, and hold Designer, their agents, heirs, executors, administrators and assigns harmless from and against any and all liability, charges, costs, expense claims and/or other loss whatsoever, including reasonable attorney fees, which Designer may suffer by reason of the designs furnished hereunder. Employer agrees to carry comprehensive General Liability Insurance applicable to any claims that might arise due to any work performed under this Agreement.

DISPUTE: In the event of any dispute arising between the parties, relating to this Agreement or work relating to it, the matter shall be submitted to Arbitration in accordance with Article XXI of the **Standard Design Agreement**. The Arbitrator's decision shall be final and binding.

RIDERS: Any rider or addendum mutually agreed to by the Employer and the Employee, and approved by the Union, shall be attached to and become part of this Agreement.

ACCEPTED: by Employer

SIGNATURE _____
PRINT NAME _____
DATE _____
ADDRESS _____
_____
PHONE _____
E-MAIL _____

ACCEPTED: by Union

SIGNATURE _____
PRINT NAME _____
DATE _____

IS A RIDER ATTACHED? ☐ **YES** ☐ **NO**

ACCEPTED: by Designer

SIGNATURE _____
PRINT NAME _____
DATE _____
ADDRESS _____
_____
PHONE _____
E-MAIL _____