



# >> MUSIC CLEARANCE REQUEST FORM

**WWW.MUSIODATA.COM**

252 Seventh Ave. Suite 17G New York, NY 10001

**TEL 212-217-2566 | FAX 212-217-2567**

[swilbur@musiodata.com](mailto:swilbur@musiodata.com)

Please fill out this form and return by email attachment along with music to review to: [swilbur@musiodata.com](mailto:swilbur@musiodata.com)

**Date (MM/DD/YY):**

**Name:**

**Company:**

**Street Address:**

**City:**                      **State/Region:**                      **Postal Code:**

**Telephone #:**                      **Fax #:**

**EMAIL:**

**RUSH REPORT? Yes  No**

**I CERTIFY THAT IF THIS WORK IS REMINISCENT OF ANY OTHER KNOWN PIECE, GROUP OR SINGER, OR IF I HAVE BEEN ASKED TO CREATE MUSIC SIMILAR TO SOMETHING ELSE, I WILL INDICATE THOSE TITLES OR ARTISTS BELOW: IF NOT, CHECK HERE:**


**ANY SAMPLES USED MUST BE LISTED WITH SOURCE INFORMATION HERE: IF NO SAMPLES HAVE BEEN USED, CHECK HERE:**


**MUSIC TO BE CLEARED (LIST TITLE(S), TIME (TV/R) OR OTHER IDENTIFIERS:**


**CLIENT:**

**PRODUCT:**

**AGENCY:**

**MUSIC COMPANY:**

**SEND BILL TO:**

**ADDRESS:**

**OTHER COMMENTS:**

**BY CHECKING THIS BOX, I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE**

**UNLESS INVOICE IS TO BE PAID BY ANOTHER PARTY LISTED ABOVE, I AGREE TO PAY THE APPLICABLE FEES FOR SERVICES RENDERED.**

***ALL APPLICABLE FIELDS MUST BE FILLED OUT BEFORE WORK IS DONE***