



Please fill in all blanks, check all applicable boxes, and sign and date at bottom. This document does not provide any coverage or amend any existing coverage.

1. GENERAL INFORMATION

Form with fields for Pilot's Name, Address, City, State, Zip, Phone (Home, Work), Date of Birth, Occupation, Employer, and Named Insured.

FAA Certificate No: _____

Grid of checkboxes for FAA Certificate types: Private Pilot, Commercial Pilot, Airline Transport Pilot, Flight Instructor, Designated Examiner, 1st Class Medical, 2nd Class Medical, 3rd Class Medical, Instrument, Multi-Engine Land, Helicopter, Pro-Pilot Full Time, Pro Card, No Accidents, No Waivers, No Violations.

2. PILOT EXPERIENCE

Table with 4 columns: Total Time All Aircraft, Total Time Fixed Wing, Total Time Rotor Wing, Total Time Turbine Rotor Wing, Total Time Multi-Engine; Total Turbine (SIC + PIC), Total Time Turbine PIC, Total Time Turbo Jet (SIC + PIC), Total Time Turbo-Jet PIC, Total Instrument Time; Total Time Conventional Gear, Total Time Last 12-Months, Total Time Last 90-Days, Date Last BFR, Date Last Medical.

Date you obtained your Instrument Rating: _____ Date you obtained your Multi-Engine Rating: _____

3. INSURED Make & Model (MM) PILOT EXPERIENCE and TRAINING HISTORY

Table with 3 columns: Insured MM #1, 2, 3; Total Time MM; Date/Place last Formal Training.

4. TYPE RATINGS (list all) _____

5. QUESTIONS (check "YES" or "NO")

- a. Are you flying under a waiver?
b. Have you ever been penalized for an FAR violation?
c. Have you ever had an aircraft accident, incident, and/or violation?
d. Has any insurance company and/or underwriter ever cancelled, non-renewed, or declined coverage on your behalf?
e. Have you ever been convicted of, or are you under indictment in a legal action involving drugs or narcotics?
f. Have you ever been convicted of driving a motor vehicle under the influence of alcohol or narcotics?
g. Has your driver's license ever been suspended or revoked?

Explain all YES answers (attach separate sheet, if necessary) : _____

I understand that by signing below, I am agreeing that: all statements on this application are complete and true to the best of my knowledge.

Pilot's Signature: _____

Date: _____