



AVIATION UNDERWRITERS, INC.
4515 Poplar Av., Suite 415, Memphis, TN 38117

APPLICATION FOR AIRCRAFT HULL AND LIABILITY INSURANCE

(Check which is desired) Quotation Insurance

Name of Applicant _____

Registered Owner of Aircraft if other than Applicant (explain) _____

Address _____
NO. STREET CITY COUNTY STATE ZIP

Business/Occupation of Applicant _____

Applicant is: Individual(s) Corporation Partnership Other _____

Insurance is requested from _____, 20_____ to _____, 20_____

LIABILITY COVERAGE	LIMITS OF LIABILITY DESIRED		PREMIUMS
	EACH PERSON	EACH OCCURRENCE	
<input type="checkbox"/> A. BODILY INJURY LIABILITY (excluding passengers)	\$	\$	\$
<input type="checkbox"/> B. PASSENGER BODILY INJURY LIABILITY	\$	\$	\$
<input type="checkbox"/> C. PROPERTY DAMAGE LIABILITY	xxxxxxxxxxxxxx	\$	\$
<input type="checkbox"/> D. SINGLE LIMIT BODILY INJURY & PROPERTY DAMAGE LIABILITY _____ INCLUDING PASSENGERS	xxxxxxxxxxxxxx	\$	\$
<input type="checkbox"/> E. MEDICAL PAYMENTS INCLUDING CREW	\$	\$	\$
<input type="checkbox"/> OTHER LIABILITY	\$	\$	\$
HULL COVERAGE	AMOUNT OF INSURANCE	DEDUCTIBLE	PREMIUMS
<input type="checkbox"/> F. ALL RISKS IN MOTION	\$	IN MOTION <input type="checkbox"/> \$1,000 <input type="checkbox"/> 500 <input type="checkbox"/> 250 <input type="checkbox"/> \$ _____ (Other)	\$
<input type="checkbox"/> G. ALL RISKS NOT IN MOTION	\$	NOT IN MOTION	\$
<input type="checkbox"/> OTHER HULL COVERAGE	\$	\$ _____	

AIRCRAFT: If Aircraft Certificate is other than Standard, please so indicate

Year, Make and Model	Engine Horse-Power	FAA Number	Seating Capacity		Land (L) Sea (S) Amp (A)	Purchased		Price Paid by Applicant (incl. extras)	Present Est. Value (incl. extras)	Engine Hrs. Since Last Major Overhaul	# of Hrs. Flown on Aircraft in Last 12 Mos.
			crew	pass		New	Date				
1.											
2.											
3.											
4.											

Aircraft usually based at _____
Name of Home Airport, if Private Airport, give detailed location

- Hangared
- Tied Down
- Paved
- Sod
- Length

PURPOSES OF USE (Check all applicable uses) **ARE ANY FLIGHTS CONTEMPLATED OUTSIDE CONTINENTAL US?** _____

If "yes", where & how often: _____

- (a) "Pleasure and Business" means personal and pleasure use and use in Direct connection with the Insured's business, excluding any operation for which a charge is made;
- (b) "Industrial Aid" means the uses enumerated in the definition of pleasure and business" and also includes transportation of executive employees, guests and customers, excluding any operation for which a charge is made;
- (c) "Limited Commercial". The term "Limited Commercial" is defined as Including all the uses permitted in (a) and (b) above and including Student Instruction and Rental to pilots but excluding passenger carrying for hire or reward;
- (d) "Commercial Instruction or Rental" means the uses enumerated in the definition of "pleasure & business" above, and use of the aircraft for the transportation of passengers and or freight for hire but excluding the use of the aircraft for instruction or rental to others;
- (e) "Commercial" means with respect to the purpose of use of the aircraft, all operations in the business of the Named Insured except crop dusting, spraying, seeding or any form of hunting;
- (f) Flying Club means the uses enumerated in the definition of "pleasure and business";
- (g) Special Uses: _____

PILOTS: (Complete in Full) _____

Name	Age	Pilot Certificate & Rating							Medical Certificate		Pilot Hours Logged				
		S	P	C	Asel	Amel	IFR	ATP	Day of Last Physical	Total	Last 90 Days	Retract. Gear	Multi-Engine	In Aircraft Model toBe Insured	Date Last BFR
1.															
2.															
3.															
4.															

If insured is flying club, specify number of student pilots _____ private pilots _____ commercial pilots _____

Name and address of pilots' employer if other than the applicant _____

- 1. Do any pilots named above have any: (a) physical impairments? No Yes (explain) _____
- (b) waivers, limitations, conditions attached to their medical certificates? No Yes (explain) _____
- 2. Has a FAA or Military Pilot Certificate held by any pilot named above ever been suspended or revoked? No Yes (explain) _____
- 3. Has any pilot named above ever been cited for any violation of Federal Air Regulations? No Yes (explain) _____
- 4. Has any pilot named above ever been involved in any aircraft accident? No Yes(explain) _____
- 5. Has any pilot named above ever been convicted of or pleaded guilty to a felony or for drunken driving? No Yes (explain) _____

APPLICANT IS Sole Owner Owner subject to mortgage or conditional sales contract Other(explain) _____

If aircraft is encumbered, name and address of lienholder _____

Credit Life Purchased? No Yes

Amount of encumbrance (excluding interest and finance charges) \$ _____ Number of payments _____ Amount of Each \$ _____

Date of final Installment _____ Will Breach of Warranty be required by lienholder? _____

Name of last Aviation Insurance Carrier (if none so state) _____

To the Insured's knowledge no damage has been sustained to, nor claims by others have arisen out of the operation of, any aircraft owned by or in the custody of the insured except _____

Has any Insurance company or Underwriter at an time declined an application submitted by or cancelled or refused to renew a policy held by the applicant or any of the pilots named herein in regard to any type of insurance, whatsoever? _____
If so, explain _____

All particulars herein are warranted true and complete to the best of my/our **knowledge and no information** has been withheld or suppressed and I/We agree that this Application and the terms and conditions of the policy in use by the insurer shall be the basis of any contract between me/us **and the** Insurer. I hereby authorize this Company to investigate all or any qualifications or statements contained herein.

I/We authorize the following agent/broker to represent me/us in the placing of this insurance: _____
Name and Address of Agent/Broker _____
Date _____ Applicant's Signature _____

This Application does not commit the Company to any liability nor make the Applicant liable for any premium unless and until the Company agrees to effect this insurance.

AGENT
EBCO Aviation Underwriters, Inc.
4515 Poplar Ave., Suite 415, Memphis, TN 38117