

AIRCRAFT SUPPLEMENT

Applicant:

Aircraft Information: Chartered Aircraft

Number of flights per year: Average number of employees per trip:

Detail by Aircraft

Year Built	Make and Model	# of Engines	Fixed Wing or Rotary	Annual Flight Hours	Is Aircraft Leased*, Chartered, Owned, or Private	Total # of Seats		Are Crew Members Employees	Average # of Employees Per Flight**	FAA#	City/State Where Aircraft is Normally Hangered
						Crew	Passenger				
								<input type="checkbox"/> Y <input type="checkbox"/> N			
								<input type="checkbox"/> <input type="checkbox"/> N			
								<input type="checkbox"/> Y <input type="checkbox"/> N			
								<input type="checkbox"/> Y <input type="checkbox"/> N			

* Leased aircraft: One that is not owned by the applicant and made available for the use of the applicant under the terms of a rental or lease agreement for a period of not less than 30 consecutive days.

** Include the total number of crew and passenger seats normally occupied by employees, including pilots if they are employed by the insured.

Is there fractional ownership on any of the planes listed above? If so, list the planes and the percentage of ownership.

Describe in detail the general use of each of the above airplanes. Include information about the frequency of trips and the origin and destination of trips.

Provide the maintenance schedule of each of the above airplanes, specifically when was the last scheduled maintenance, what were the findings and how often is maintenance performed.

If a helicopter is listed above, complete the following questions.

Is the craft owned and operated by the applicant or by an independent contractor?

If by contractor, is applicant held harmless by contract terms? Yes No

Number of flights per month:

Number of employees on board: Maximum Average

Number of pilots used in operation: Maximum continuous number of hours per week that a pilot is on call:

Are there any restrictions about flying in bad weather or at night? Yes No If yes, explain in detail.

Average occupancy per trip: Geographical limits of flight exposure:

Pilot Information

Full Name	Age	Licenses Held	Career Hours	Hours In Covered Aircraft	Current Employee of the Applicant?

Provide a chronological listing of the pilot's flight experience including training and past employment.

Are all pilots employed only for the purpose of being a company pilot? Yes No If no, explain in detail.

Has any pilot been cited for any violation or been involved in any aircraft accident? Yes No If yes, explain (include loss experience).