

Aircraft Insurance Application

Applicant is an Individual Applicant is Applicant is an Individual Applicant is Applicant is Applicant is Applicant is Other' (explain below) Applicant is Susiness Is Applicant is Susiness Is Applicant is Susiness Is Aircraft will be operated under FAR Part 135 Aircraft will be operated under FAR Part 135 Aircraft will be managed by other party (not Applicant Not Accidents/Incidents or Claims in last 5-years Insurance has never been Canceled or Non-Renewe Insurance has never		INFORMA	TION		Check all that apply	below			
City: State: Zip: Applicant is a Limited Liability Company Applicant is Other* (explain below) Aircraft will be operated under FAR Part 135 Aircraft will be operate	Applica	ant's Name:			☐ Applicant is an Indiv	vidual			
State: Zip: Applicant is Other* (explain below) Aircraft will be operated under FAR Part 135 Aircraft will be operated under FAR Part 135 Aircraft will be operated under FAR Part 135 Aircraft will be managed by other party (not Applicant No Accidents/Incidents or Claims in last 5-years Insurance has never been Canceled or Non-Renewe Insurance has never been Canceled or Non-Re					Applicant is a Incorporation				
Phone: Home: Work:	City:				☐ Applicant is a Limite	ed Liability Comp	any		
Aircraft will be managed by other party (not Applicant of Applicant			State: Z	ip:	☐ Applicant is Other*	(explain below)			
Current Insurance Carrier:		Phone:	Home: Work:		☐ Aircraft will be oper	ated under FAR	Part 135		
List Principal Owner(s) / Partner(s): AIRCRAFT INFORMATION: FAA "N" No: Year Make & Model Seats Crew / Passengers Insured Value Liability Lim / \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Applicant's I	Business Is:			☐ Aircraft will be man	aged by other pa	rty (not Applican		
List Principal Owner(s) / Partner(s): AIRCRAFT INFORMATION: FAA "N" No: Year Make & Model Seats Crew / Passengers Insured Value Liability Lim / \$ \$ / \$ / \$ / \$ \$ / \$ / \$ / \$ \$ / \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$ / \$ \$	Current Insura	nce Carrier:			☐ No Accidents/Incide	ents or Claims in	last 5-years		
AIRCRAFT INFORMATION: FAA "N" No: Year Make & Model Crew / Passengers Insured Value Liability Lim / \$ \$ AIRCRAFT USE INFORMATION: 2. Aircraft are based at the following airport(s): 2. Aircraft are hangared or tied outside: 2. Annual hours each aircraft is operated with a single pilot crew: 2. Average number of passengers per flight: 2. Non-Owned aircraft types utilized by the Applicant: 3. Non-Owned aircraft types utilized by the Applicant: 4. Non-Owned aircraft annual number of flights: 5. From whom are Non-Owned aircraft rented, borrowed, chartered:	Current Covera	age Expires:			☐ Insurance has neve	er been Canceled	or Non-Renewe		
FAA "N" No: Year Make & Model Seats Crew / Passengers Insured Value Liability Lim	List Princip	al Owner(s)	Partner(s):						
AIRCRAFT USE INFORMATION: a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:	AIRCRAFT	INFORMA	ATION:						
/ \$ \$ \$ \$ // \$ \$ \$ \$ // \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ \$ // \$ \$ \$ \$ \$ \$ \$ \$ \$ // \$	FAA "N" No:	Year	Make & Model			Insured Value	Liability Lim		
/ \$ \$ // \$ // \$ // \$ \$ // \$ // \$ \$ //					/ \$	3	\$		
/ \$ \$ // \$ // \$ \$ // \$ // \$ \$ // \$ // \$ \$ // \$ /					/ \$	3	\$		
/ \$ \$ AIRCRAFT USE INFORMATION: a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:					/ \$	3	\$		
AIRCRAFT USE INFORMATION: a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:					/ \$	5	\$		
AIRCRAFT USE INFORMATION: a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:					/ \$	3	\$		
AIRCRAFT USE INFORMATION: a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:					/ \$	3	\$		
AIRCRAFT USE INFORMATION: a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:									
a. Aircraft are based at the following airport(s): b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:	AIDODAET	HOE INFO	DMATION				·		
b. Aircraft are hangared or tied outside: c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:									
c. Annual hours each aircraft is operated with a single pilot crew: d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:									
d. Average number of passengers per flight: e. Non-Owned aircraft types utilized by the Applicant: f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:		-							
f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:									
f. Non-Owned aircraft annual number of flights: g. From whom are Non-Owned aircraft rented, borrowed, chartered:	_								
	∍. Non-Owned		ual number of flights:						
n. Purpose for use of Non-Owned aircraft:		l aircraft ann							
	f. Non-Owned		ned aircraft rented, borrowed, chartered:						
	f. Non-Owned g. From whom	are Non-Ow							
	f. Non-Owned g. From whom n. Purpose for	are Non-Ow use of Non-	Owned aircraft:	insureds (i.e.	airport, city, hangar own	er):			
elst hames and addresses of loss payees and normistasts of any additional insureds (i.e. all port, only, hangar owner).	f. Non-Owned g. From whom n. Purpose for	are Non-Ow use of Non-		insureds (i.e.	airport, city, hangar own	er):			
or any additions of the payous and normalizers or any additional insured (i.e. anyon, only, mangar owner).	f. Non-Owned g. From whom n. Purpose for	are Non-Ow use of Non-	Owned aircraft:	insureds (i.e.	airport, city, hangar own	er):			
and the desired of the separate of the separat	f. Non-Owned g. From whom n. Purpose for	are Non-Ow use of Non-	Owned aircraft:	insureds (i.e.	airport, city, hangar own	er):			

Allstate Aviation, LLC | 9404 Scratch Ct. Wilmington, NC 28412 | (407) 967-5118 | Marcel@AllstateAviation.com

FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	Other :	Est. Annual Hrs:	
AA "N" No:	□P&B	☐ Industrial Aid	☐ Charter / Air Taxi	Other :		
AA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
AA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
AA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
AA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
NAMED PILOTS	(Attach a Pilot Re		h pilot):		Pilot Name	
ADDITIONAL INF		ppopy (if applicable				
. Name of Charter or	Management com				ons:	
a. Name of Charter or Charter Certificate N	Management com	Ye	ears in Business:	Base of Operation		
. Name of Charter or Charter Certificate N . Aircraft Maintenance	Management com	Y6	ears in Business:	Base of Operation	ons:	
Name of Charter or Charter Certificate No Aircraft Maintenance Will insured aircraft	Management com lo.: provided by: be used on other	Ye	ears in Business:	Base of Operation	ons: Yes	
Name of Charter or Charter Certificate No Aircraft Maintenance Will insured aircraft Will insured aircraft	Management com No.: provided by: be used on other be used outside the	than paved runway	ears in Business:	Base of Operation	ons: Yes	
Name of Charter or Charter Certificate N Aircraft Maintenance Will insured aircraft Will insured aircraft Does Applicant own	Management com lo.: e provided by: be used on other be used outside the or exclusively lea	than paved runway ne continental Unit	ys?ted States?	Base of Operation	ons: Yes	
Name of Charter or Charter Certificate N Aircraft Maintenance Will insured aircraft Will insured aircraft Does Applicant own Will anyone other the	Management com No.: e provided by: be used on other be used outside the or exclusively lea an named pilots of	than paved runway ne continental Unit use any other aircra	ys?ted States?	Base of Operation	YesYes	
a. Name of Charter or Charter Certificate No. Aircraft Maintenance: Will insured aircraft No. Does Applicant own Will anyone other the Does Applicant emp	Management com lo.: e provided by: be used on other be used outside the or exclusively lea an named pilots of	than paved runway ne continental Unit use any other aircra operate the insured	ys?aft?	Base of Operation	YesYesYes	
a. Name of Charter or Charter Certificate No. Aircraft Maintenance: Will insured aircraft No. Does Applicant own Will anyone other the Does Applicant employees Applicant have the Has Applicant ever	Management com No.: e provided by: be used on other be used outside th or exclusively lea an named pilots of ploy their own mail e any Non-Owned had insurance der	than paved runway ne continental Unit use any other aircra perate the insured ntenance personne Aircraft exposure	ears in Business: ys? ted States? aft? d aircraft? el?	Base of Operation	YesYesYesYesYesYesYes	
a. Name of Charter or Charter Certificate No. Aircraft Maintenance: Will insured aircraft No. Does Applicant own Will anyone other the Does Applicant employees Applicant have the Has Applicant ever	Management com No.: e provided by: be used on other be used outside th or exclusively lea an named pilots of ploy their own mail e any Non-Owned had insurance der	than paved runway ne continental Unit use any other aircra perate the insured ntenance personne Aircraft exposure	ears in Business: ys? ted States? aft? d aircraft? el?	Base of Operation	YesYesYesYesYesYesYesYes	
. Name of Charter or Charter Certificate No. Aircraft Maintenance. Will insured aircraft. Will insured aircraft. Does Applicant own Will anyone other the Does Applicant emp. Does Applicant have Has Applicant ever Has Applicant or National Control of Charter of Cha	Management com No.: e provided by: be used on other be used outside the or exclusively lea an named pilots of bloy their own mail e any Non-Owned had insurance der	than paved runway ne continental Unit ise any other aircra perate the insured intenance personne Aircraft exposure' nied or cancelled?	ears in Business: ys? ted States? d aircraft? el? ccidents, or violations?	Base of Operation	YesYesYesYesYesYesYes	
Does Applicant ever Has Applicant or Na Will insured aircraft Does Applicant emp Does Applicant emp Does Applicant own Has Applicant or Na Will insured aircraft Will anyone other th Does Applicant emp	Management com No.: e provided by: be used on other be used outside the or exclusively lea an named pilots of bloy their own main e any Non-Owned had insurance der amed Pilot ever ha med Pilot ever ha be used for anyth	than paved runway ne continental Unit use any other aircra perate the insured ntenance personne Aircraft exposure nied or cancelled? d any incidents, ac d any felony convi	ears in Business: ys? ted States? aft? d aircraft? ccidents, or violations? ictions or license suspensporting passengers?	Base of Operation	YesYesYesYesYesYesYesYesYesYesYes	
a. Name of Charter or Charter Certificate No. Aircraft Maintenance: Will insured aircraft d. Will insured aircraft e. Does Applicant own . Will anyone other the Does Applicant empl. Does Applicant ever . Has Applicant or Natic.	Management com No.: e provided by: be used on other be used outside the or exclusively lea an named pilots of bloy their own main e any Non-Owned had insurance der amed Pilot ever ha med Pilot ever ha be used for anyth	than paved runway ne continental Unit use any other aircra perate the insured ntenance personne Aircraft exposure nied or cancelled? d any incidents, ac d any felony convi	ears in Business: ys? ted States? aft? d aircraft? ccidents, or violations? ictions or license suspensporting passengers?	Base of Operation	YesYesYesYesYesYesYesYesYesYesYes	

I understand that by signing above, I am agreeing that: all statements on this application are complete and true to the best of my knowledge; no information has been suppressed or withheld; no insurer has cancelled or refused to renew this insurance; the information herein and the truthfulness thereof will be the basis of any insurance provided by the company; this application does not bind the applicant or the company to provide any insurance; any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulentinsurance act, which is a crime, and shall also be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

ADDITIONAL AIRCRAFT INFORMATION:

FAA "N" No:	Year	Make & Model	Seats Crew / Passengers	Insured Value	Liability Limit
			/	\$	\$
			/	\$	\$
			/	\$	\$
			/	\$	\$
			/	\$	\$
			/	\$	\$
			/	\$	\$

AIRCRAFT USE INFORMATION (Continued):

FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□P&B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	
FAA "N" No:	□ P & B	☐ Industrial Aid	☐ Charter / Air Taxi	☐ Other :	Est. Annual Hrs:	