- THE AVIATION INSURANCE EXPERTS



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7 W. Main St., Suite 100 Apopka, FL 32703

Instruction / Rental Aircraft Application

Name of Applicant:				
• •				
Any FAA, Associati	ion or Manufacturer Certifications:			
Home Airport(s): Years in Business:				
		.):		
3	, ,	,		
N Number:	er: Year / Make / Model:		Fotal Seats:	
Insured Value / Purchase Price: Requested Limit of Liability:				
Estimated Annual F	stimated Annual Flight Hours: Dual Instruction: Open Rental:		Other:	
Please at	Airport Property Lease, Fuel Su	ment, Aircraft Leaseback Agreement, Main pplier Agreement, FAA Part 141/135 Certifi Questionnaire		reement,
1. Will anyon	ne not named above give training or be	paid for the operation of the Applicant's	□ No	Yes
aircraft? 2. Are any of the pilots not full-time employees or provide pilot services to others more than 20%			□No	Yes
of the time? 3. Do any of the instructors have any ownership interest in any of the aircraft?			☐ No	☐ Yes
4. Are any pilots or employee passengers not covered by separate Worker's Compensation				Yes
insurance? 5. Has any instructor logged fewer than 100 flight hours in the preceding 12 months?			□No	☐ Yes
6. Does any instructor have fewer than 100 flight hours in the aircraft he or she will be operating?			☐ No	☐ Yes
7. Does any multi-engine instructor have fewer than 250 hours in mutli-engine aircraft?8. Are any instructors under 25 years of age?			☐ No ☐ No	☐ Yes ☐ Yes
9. Will the aircraft be operated outside the continental United States?			□ No	Yes
10. Will any aircraft be flown for hire for purposes other than flight instruction? (Including FAR Part 121 and 135, aerial photography / survey / patrol, etc.)			∐ No	∐ Yes
11. Do any of the aircraft have modifications, conversions or STC's installed?			☐ No	☐ Yes
12. Does the Applicant/Operator directly employ in-house maintenance personnel?			☐ No	Yes
13. Have any of the maintenance personnel not completed the manufacturer's maintenance course?			∐ No	∐ Yes
	applicant hangar, service, repair or cre-	w other aircraft not listed above?	☐ No	□Yes
15. Does the applicant operate, charter or train in any other aircraft not listed above?			☐ No	Yes
16. Has the applicant, operator or any named pilot had any aviation accidents, incidents,			☐ No	Yes
violations, or automotive DUI convictions within the last 5 years? 17. Have there been any changes in ownership, upper-management or chief pilot in the last 12			□No	☐ Yes
months?				
	Please explain all "Yes" answ	vers below. Attach additional pages as require	e d .	
incomplete or misleading UNDERSIGNED AFFIRM	information is guilty of a felony of the third degree." MS: This information is correct to the best of my/our	defraud or deceive any insurer files a statement of claims knowledge and belief and no information is being withheld nder Aviation Associates as my/our Agent of Record for this	or suppressed. I	
SIGNED:				
Applicant:		Title:	Date:	