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| LOGO | | | | **GENERAL LIABILITY  INSURANCE APPLICATION** | |
| **APPLICANT INFORMATION** | | | | | |
| **Name of Applicant:** | |  | | | |
| **Address:** |  | | | | |
| **Quotation for Airport Liability Insurance is requested for an annual period beginning:** | | | | 3 | |

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| **GENERAL INFORMATION** | | | | | | | | | | |
| Loc ID |  | | | | | | | | | |
| Does the insured written agreements for hangaring aircraft? | | | **□ YES □ NO** | | | | | | | |
| Has the insured entered into any other written agreements? - If YES, explain) | | | | | **□ YES □ NO** | | | | | |
|  | | | | | | | | | | |
| Is any construction anticipated within the next 12 months? - If YES, explain) | | | | **□ YES □ NO** | | | | | | |
|  | | | | | | | | | | |
| Has any Insurer cancelled, declined or refused to renew any Airport / Aircraft insurance? - If YES, explain) | | | | | | | | | **□ YES □ NO** | |
|  | | | | | | | | | | |
| Has Applicant had any Airport/Aviation losses/claims during the last five years? | | | | | | **□ YES □ NO** | | | | |
| **Date Occurred** | | **Description** | | | | | **Amount Paid** | **Reserved** | | **Open/Closed** |
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| Website Links: | | | | | | | | | | |

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| **COVERAGE** | |
| **Coverage** | **Deductibles** | |
| Premises Liability: $ Each Occurrence |  | |
| Products/Completed Operations: $ Each Occurrence/Aggregate |  | |
| Fire Legal Liability: $ Each Occurrence |  | |
| Hangarkeepers Liability: $ Each Aircraft  $ Each Occurrence |  | |
| Premises Medical Payments: $ Each Person |  | |
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| **OPERATIONS** | | | | | | | | | | | | | | | | | | | | | |
| ***Indicate all operations and estimated annual gross receipts the insured engages in:*** | | | | | | | | | | | | | | | | | | | | | |
| Aircraft Painting: | | | | **$** | | | | Hangaring | | | | **$** | | | | | | Auto Parking | **$** | | |
| Aircraft Fueling | | | **$** | | | | | Propeller Repair | | | | | | | **$** | | | Aircraft Repair | | **$** | | |
| Engine Overhaul | | | | **$** | | | | Charter | | | **$** | | | | | | | **All other sources and receipts below:** | | | | |
| New Aircraft | **$** | | | | | | | Instruction/Rental | | | | | | | | **$** | |  | | | **$** | |
| Used Aircraft | | **$** | | | | | | Helicopter Repair | | | | | | | | **$** | |  | | | **$** | |
| Parts Not Installed | | | | | **$** | | | Restaurant/Vending | | | | | | | | | **$** |  | | | **$** | |
| ***Fueling:*** | | | | | | | | | | | | | | | | | | | | | | |
| Is fueling done on premises by the applicant? | | | | | | | | | **□ YES □ NO** | | | | | | | | | | | | | |
| How is fueling done? | | | | | |  | | | | | | | | | | | | | | | | |
| Are static lines attached during refueling operations? | | | | | | | | | | **□ YES □ NO** | | | | | | | | | | | | |
| Are there any self-service fueling operations? | | | | | | | | | **□ YES □ NO** | | | | | | | | | | | | | |
| Who is the fuel supplier? | | | | | | |  | | | | | | | | | | | | | | | |
| ***Training:*** | | | | | | | | | | | | | | | | | | | | | | |
| Is Line Crew provided formal training? If yes, provide details. | | | | | | | | | | | | | **□ YES □ NO** | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | | | | | |
| Are you an active participant in the NATA Safety First program? | | | | | | | | | | | | | | **□ YES □ NO** | | | | | | | | |

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| **EQUIPMENT***.* | | | | | | | | | | | |
| Fuel Trucks: | |  | Tugs: |  | | | Golf Carts: | |  | Mowers: |  | |
| Sweepers: |  | | Elevators: | |  | | Aircraft: |  | | | | |
| Is the equipment on a scheduled maintenance program? | | | | | | **□ YES □ NO** | | | | | | |

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| **STORAGE** | | | | | | |
| Average number of aircraft you hangar per month including maintenance? | | | | | |  |
| Do you move aircraft from hangars you do not own? | **□ YES □ NO** | | | | | |
| Average value of any one aircraft in your care, custody, and control? | | | | | **$** | |
| Average value of all aircraft in your care, custody, and control? | | | **$** | | | |
| Max value of any one aircraft in your care, custody, and control? | | | | **$** | | |
| Max value of all aircraft in your care, custody, and control? | | **$** | | | | |

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| **ADDITIONAL INTERESTS** |
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| **REMARKS / ADDITIONAL INFORMATION** |
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| **Date:** |  | **Applicant’s Signature** |  |