

Renters & Certified Flight Instructors Application

MAIL OR FAX TODAY FOR A FREE, NO-OBLIGATION QUOTE.



Wheels up.

1.800.826.4442

fax 316.942.1260

www.pimi.com

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Non-owned Aircraft Liability and Aircraft Damage Liability Insurance

(Coverage is not available to residents of Alaska or Hawaii.)

I request insurance to cover my activities as a (please select one):

- Individual Renter/Non-owner**—Pleasure and business-related use of non-owned, fixed wing, non-pressurized, land aircraft having a non-turbine single engine of 450 horsepower or less (including non-powered sailplanes) and a capacity of no more than seven (7) total passengers and/or seats and having a Standard, Experimental, Restricted or Light Sport Aircraft certificate.
- Flight Instructor**—Pleasure and business-related flying and flight instruction to others in non-owned, fixed wing, non-pressurized, land aircraft having a non-turbine single engine of 450 horsepower or less (including non-powered sailplanes) and a capacity of no more than seven (7) total passengers and/or seats and having a Standard, Experimental, Restricted or Light Sport Aircraft certificate.

For information about multi-engine and helicopter coverage, please call 1.800.826.4442.

Pilot Information

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

DAYTIME PHONE: _____ FAX: _____

EMAIL: _____

DATE OF BIRTH: _____ AOPA MEMBER #: _____

OCCUPATION: _____

Pilot Certification

- STUDENT LIGHT SPORT COMMERCIAL
- RECREATION PRIVATE ATP

Ratings

- INSTRUMENT
- OTHER: _____

Pilot Logged Hours

TOTAL: _____ LAST 12 MONTHS: _____

TYPE OF AIRCRAFT USUALLY FLOWN: _____ # HOURS AS PIC IN TYPE: _____

Flight Instructor Certifications

- CFI-INST. CFI-ME

Flight Instruction Hours

TOTAL: _____ LAST 12 MONTHS: _____

History

Within the last 36 months have you:

- been involved in any aircraft accident/incident? Yes No
- received a citation for any FAR violation? Yes No
- had your pilot or driver's license suspended? Yes No
- been convicted of a felony or DUI charge? Yes No

If yes to any of the above, please contact us at 1.800.826.4442.

I have enclosed a check payable to my agent in the amount of \$_____.

(Certain state taxes may apply—please contact your agent regarding any state taxes applicable for your state.) I understand that once coverage is bound, a minimum of 50 percent of the premium is fully earned. (May not be applicable in some states.)

Some states require that we notify you that any person who knowingly and with intent to defraud any insured, or other person, files an insurance application containing false or misleading information or any fact material thereto, commits a fraudulent insurance act which is a crime.

Signature: _____

Date: _____

Coverages

Coverage is underwritten by AIG Aviation, Inc. Premium discounts available to AOPA members.

Liability Coverage for Non-owned Aircraft

Provides coverage for bodily injury and property damage for which you are legally liable arising out of your use of non-owned aircraft, but excluding physical damage to non-owned aircraft.

Individual Renter/Non-owner

Each Occurrence	Passengers	AOPA Premium	Non-AOPA Premium
\$250,000	\$25,000	<input type="checkbox"/> \$80	<input type="checkbox"/> \$85
\$500,000	\$50,000	<input type="checkbox"/> \$108	<input type="checkbox"/> \$114
\$500,000	\$100,000	<input type="checkbox"/> \$171	<input type="checkbox"/> \$180
\$1,000,000	\$100,000	<input type="checkbox"/> \$208	<input type="checkbox"/> \$219

Flight Instructor

Each Occurrence	Passengers	AOPA Premium	Non-AOPA Premium
\$250,000	\$25,000	<input type="checkbox"/> \$190	<input type="checkbox"/> \$200
\$500,000	\$50,000	<input type="checkbox"/> \$332	<input type="checkbox"/> \$350
\$500,000	\$100,000	<input type="checkbox"/> \$475	<input type="checkbox"/> \$500
\$1,000,000	\$100,000	<input type="checkbox"/> \$617	<input type="checkbox"/> \$650

Physical Damage Liability for Non-owned Aircraft

Provides coverage for physical damage to non-owned aircraft for which you are legally liable. This coverage is only available in conjunction with Liability coverage.

Physical Damage Limit	AOPA Premium	Non-AOPA Premium
\$5,000	<input type="checkbox"/> \$94	<input type="checkbox"/> \$99
\$10,000	<input type="checkbox"/> \$166	<input type="checkbox"/> \$175
\$20,000	<input type="checkbox"/> \$237	<input type="checkbox"/> \$250
\$30,000	<input type="checkbox"/> \$332	<input type="checkbox"/> \$350
\$40,000	<input type="checkbox"/> \$427	<input type="checkbox"/> \$450
\$60,000	<input type="checkbox"/> \$570	<input type="checkbox"/> \$600
\$80,000	<input type="checkbox"/> \$736	<input type="checkbox"/> \$775
\$100,000	<input type="checkbox"/> \$926	<input type="checkbox"/> \$975
\$150,000	<input type="checkbox"/> \$1,353	<input type="checkbox"/> \$1,425
\$200,000	<input type="checkbox"/> \$1,805	<input type="checkbox"/> \$1,900

I decline Physical Damage coverage.

Optional Coverages

Add my employer as an additional insured.* \$50

Name of employer: _____

Add the Civil Air Patrol Endorsement.** \$50

*Your employer may require this coverage if you use non-owned aircraft on company business. This coverage is ONLY available to private, commercial, and ATP licensed pilots. Coverage does not apply to employers who are: involved in the manufacture, building, designing, selling, or distribution of aircraft, aircraft engines, parts, accessories, components; or fuel, engage in the operation of an aircraft repair shop, sales agency, rental service, flight school, pilot training center or any other commercial flying service.

**This coverage may be purchased to protect you against claims arising from your participation in Civil Air Patrol activities. Contact PIM for more information.

Coverage for Acts of Terrorism under the Terrorism Risk Insurance Extension Act of 2005 (TRIEA)

Provides coverage for bodily injury and property damage for which you may be liable from certified acts of terrorism. This coverage is automatically applied for a \$1 charge.

I would like to begin coverage on _____ for one year. I understand that coverage shall not be effective until the company has accepted my application and premium payment has been received in full through PIM Aviation Insurance. I also understand that my actual policy will have terms, conditions and exclusions not found in this general description. I warrant that all of the information in this application is true and complete to the best of my knowledge.

****Remember to add \$1 to your selected premium for TRIEA coverage****



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