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Private Aircraft Application Form

APPLICANT DETAILS									
Name of Insured:									
Street Address:									
City:	Province:		Postal Code:						
	Current Insurer: Date Coverage Required/Expiry Date:								
Has prior insurance ever been cancelled or non-renewed? Yes No									
PRINCIPAL									
Owner:	: Website:								
AIRCRAFT DETAILS									
How is aircraft registered: Choos	se one_								
Normal Amateur Built Ultr	alight Advanced Ultralight	Helicopter Gyrocopter	Balloon Glider						
Aircraft Registration:	Passenger Seats (excl. pilot):								
Year, Make and Model:	Total time (last 12 months):								
Wheel Value \$	Float Value \$	Ski Value\$	Amphibian \$						
If aircraft is operated on one or more of these configurations, a value must be stated for each configuration									
Aircraft is usually based at:									
Estimated flying hours next 12 mg	onths:								
Hangared:	Tied Down:		Moored:						
Use of Aircraft:	Private Business & Pleasure:		Rental:						
	Instruction: Other (please describe):								
PILOT DETAILS									
	Pilot 1	Pilot 2	Pilot 3						
Name:									
Date of birth MM/YY/DD:									
Licence type and expiry date:									
Endorsements to Licence:									
Medical expiry date:									
Safety/recurrency training?									
If yes , please describe:									
Operations outside of Canada?									
if yes , please give locations:									

FIXED WING	Pilot 1		Pilot 2		Pilot 3				
	Total	Dual/PIC	Total	Dual/PIC	Total	Dual/PIC			
Total hours		/		/		/			
Total hours on make and model		/		/		/			
Total hours - retractable		/		/		/			
Total hours - multi-engine		/		/		/			
Total turbine hours		/		/		/			
Total hours - taildragger		/		/		/			
Total hours - floats/amphibian		/		/		/			
Total hours last 12 months		/		/		/			
ROTOR WING	Pile	Pilot 1		Pilot 2		Pilot 3			
	Total	Dual/PIC	Total	Dual/PIC	Total	Dual/PIC			
Total hours		/		/		/			
Total turbine hours		/		/		/			
Total hours on make and model Total hours last 12 months		/		/		/			
Total Hours last 12 Months		/		/		/			
COVERAGES REQUIRED									
HULL									
All Risks Flight & Ground: All Risks Ground Excluding Taxiing:									
LIABILITY									
\$ BI (excluding Passengers) / PD									
\$ BI (excluding Passengers) / PD plus \$100,000 PLL									
\$ BI / PD / PLL (no passenger sub-limit)									
\$ Other Limits - state limit required									
BI = Bodily Injury / PD = Property	Damage / PLL	= Passenger Leg	gal Liability						
ACCIDENTS, VIOLATIONS, INCIDENTS (please provide details)									
The angular given above are	two and com		act of my lens	vulodao and	haliaf and n	o matarial			
The answers given above are true and complete to the best of my knowledge and belief and no material information has been withheld that might influence any acceptance of insurance. No coverage is bound									
under this application form until such time as coverage is confirmed by AVRO Insurance Managers Ltd. in									
writing.									
Applicant's Signature				Date					
Prokor's Nomes	Post to de Name					0			
Broker's Name			Contact						
Email				Phone					