AIRPORT AND FBO LIABILITY SECTION

DATE (MM/DD/YYYY)

AGENCY	APPLICANT (First Named Insured)
PHONE (A/C, No, Ext):	EFF DATE / EXP DATE / BILLING METHOD (☐ DIRECT BILL ☐ AGENCY BILL) / PAYMENT PLAN / AUDIT
FAX (A/C, No):	
E-MAIL ADDRESS:	
CODE: / SUB CODE:	ESTIMATED ANNUAL PREMIUM / FOR COMPANY USE ONLY
AGENCY CUSTOMER ID:	

AIRPORT INFORMATION

LOC #	AIRPORT ID	NAME	ELEVATION Ft.	DESCRIBE ANY SEA LANES

APPLICANT'S INTEREST IN AIRPORT	AIRPORT OCCUPANCY	FIRE STATION ON PREM?	DISTANCE TO FIRE STATION
☐ TENANT ☐ AIRPORT OWNER ☐ ☐ GENERAL LESSEE ☐ SUB-TENANT	☐ ENTIRE AIRPORT ☐ PORTION - Explain	☐ YES ☐ NO	Mi.

AIRCRAFT

NUMBER OF:	AIRCRAFT BASED AT THE AIRPORT	ESTIMATED ARRIVALS/ DEPARTURES THIS YEAR
AIRLINE AIRCRAFT		
GENERAL AVIATION AIRCRAFT		
MILITARY AIRCRAFT		

RUNWAYS

CONSTRUCTION	LIGHTED?	LONGEST RUNWAY
☐ BLACKTOP ☐ GRAVEL ☐ CONCRETE ☐ TURF	☐ YES ☐ NO	Ft.

WHO MAINTAINS TAXIS AND RUNWAYS?

AIRPORT GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES	YES	NO
1. ARE THERE ANY OBSTRUCTIONS TO THE APPROACH?	☐	☐
2. DOES THE AIRPORT MAINTAIN AN AIR CRASH EMERGENCY PLAN?	☐	☐
3. DOES THE AIRPORT MAINTAIN AN ANTI-TERRORIST PLAN?	☐	☐
4. DOES THE AIRPORT EMPLOY MEDICAL PERSONNEL?	☐	☐
5. DOES THE AIRPORT MAINTAIN A BIRD STRIKE PREVENTION PROGRAM?	☐	☐
6. IS THE AIRPORT FENCED?	☐	☐
7. IS THERE A CONTROL TOWER ON THE AIRPORT? NAME OF OPERATOR: ☐ FULL TIME ☐ PART TIME (If Part Time, enter hours) START TIME: CLOSE TIME:	☐	☐

GENERAL LESSEE / AIRPORT OWNER

# BLDGS	BRIEF DESCRIPTION OF PREMISES

DESCRIBE ANY ULTRALIGHT, PARACHUTING OR AGRICULTURE ACTIVITIES ALLOWED

DESCRIBE ANY RECREATIONAL OR NON-AVIATION USE OF THE AIRPORT

DESCRIBE ANY AIR SHOWS, EXHIBITIONS OR OTHER AVIATION SPECIAL EVENTS SCHEDULED OR ANTICIPATED AT THE AIRPORT

LIST AIRLINES AND SCHEDULED AIR TAXIS THAT WILL SERVE THE AIRPORT DURING THE NEXT YEAR	LIST THE TYPES OF AIRLINE / COMMUTER EQUIPMENT

BUSINESS OWNER / MANAGEMENT

AIRPORT MANAGER	YES	NO
1. IS THERE AN AIRPORT MANAGER?	☐	☐
2. IS THE AIRPORT MANAGER AN EMPLOYEE OF THE INSURED?	☐	☐
3. IS THERE A MANAGER ON PREMISES DURING OPERATION?	☐	☐

MANAGER OF FLIGHT OPERATIONS

NAME:

EXPERIENCE:

BUSINESS OWNER

NAME:

OWNER STATUS ☐ ABSENTEE ☐ ACTIVE OWNER

EMPLOYEE STATUS ☐ CONTRACTED ☐ FULL TIME ☐ PART TIME

IF BUSINESS OWNER IS ABSENT, WHO MANAGES THE BUSINESS?

NAME:

EXPERIENCE:

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GROSS RECEIPTS

SOURCE OF RECEIPTS	AMOUNT	SOURCE OF RECEIPTS	AMOUNT	SOURCE OF RECEIPTS	AMOUNT
FUEL & LUBRICANTS	$	ENGINE OVERHAUL	$		$
AIRCRAFT REPAIR / SERVICING	$	TIE-DOWN / HANGARING	$		$
AIRCRAFT PARTS (not installed)	$	PROPELLER REPAIR	$		$
SALE OF NEW AIRCRAFT	$	AIRCRAFT CHARTER	$		$
SALE OF USED AIRCRAFT	$	RENTAL - INSTRUCTION	$		$
RESTAURANT	$	HELICOPTER REPAIRS	$		$
AIRCRAFT PAINTING	$	AUTO PARKING	$		$

FUELING

IS FUELING DONE:

☐ BY SELF SERVE ☐ BY TRUCK ☐ ON PREMISES

☐ BY APPLICANT ☐ BY GAS PUMP

IF NOT BY APPLICANT, BY WHOM:

APPLICANT SELLS: ☐ AV GAS ☐ JET FUEL ☐ AUTO FUEL

ANNUAL GALLONAGE

AIRLINE	GENERAL AVIATION	MILITARY

FUEL STORED UNDERGROUND	FUEL STORED ABOVE GROUND

TIE-DOWNS / HANGARING

LOCATION #: **BUILDING #:** **AIRPORT ID:**

TIE-DOWN PROVIDER	TYPE OF TIE-DOWNS (For Aircraft Tied-Out)	# TIE-DOWN SPACES	MAXIMUM VALUE OF AIRCRAFT IN CARE, CUSTODY AND CONTROL OF APPLICANT	
			ANY ONE AIRCRAFT	ALL AIRCRAFT
			$	$

DESCRIBE STORAGE HANGARS

STORAGE HANGAR CONSTRUCTION TYPE	STORAGE HANGAR AREA
	Sq. Ft.

GENERAL INFORMATION

ATTACH ACORD 332, HANGAR SCHEDULE, IF APPLICABLE	YES	NO
1a. DO YOU REQUIRE HANGAR TENANTS TO CARRY INSURANCE?	☐	☐
1b. IF "YES", DOES THEIR INSURANCE POLICY NAME THE OWNER AS AN ADDITIONAL INSURED?	☐	☐
2. DO YOU REQUIRE TENANTS TO SIGN A HANGAR AGREEMENT HOLDING YOU HARMLESS FOR LOSSES NOT CAUSED BY YOU?	☐	☐
3. ARE ANY AIRCRAFT OF OTHERS TAXIED, TOWED OR MOVED BY THE APPLICANT?	☐	☐

CONTRACTS AND CONSTRUCTION

ATTACH COPIES OF AGREEMENTS / CONTRACTS FOR ALL "YES" ANSWERS	YES	NO
1. HAS APPLICANT ENTERED INTO ANY AGREEMENTS ASSUMING LIABILITY OF OTHERS SUCH AS LEASE OF PREMISES, FUEL SUPPLIER, EQUIPMENT LEASES, ETC.?	☐	☐
2. DOES APPLICANT USE CONTRACTS FOR HANGARING AND TIE-DOWN SERVICE, ETC.?	☐	☐
3. ESTIMATED COST OF CONSTRUCTION FOR RUNWAYS AND TAXIWAYS: $		

VEHICLES, ELEVATORS AND AIRCRAFT

	NUMBER OF		NUMBER OF	OTHER VEHICLES, ETC.	NUMBER OF	OTHER VEHICLES, ETC.	NUMBER OF
FUEL TRUCKS		MOVING SIDEWALKS					
SNOW REMOVAL		AIRCRAFT OWNED AND OPERATED BY APPLICANT					
FIRE ENGINES							
TUGS		HELICOPTERS OWNED AND OPERATED BY APPLICANT					
MOWERS							
PICKUP TRUCKS							
PASSENGER CARS							
SWEEPERS							
ELEVATORS							
ESCALATORS							

ARE ANY VEHICLES OPERATED OFF AIRPORT? If "YES", explain. ☐ YES ☐ NO

ADDITIONAL INTEREST

INTEREST	RANK:	NAME AND ADDRESS	☐ CERTIFICATE REQUIRED	INTEREST IN ITEM NUMBER	
☐ ADDITIONAL INSURED				LOCATION:	BUILDING:
☐ LOSS PAYEE				AIRPORT:	AIRCRAFT:
☐ MORTGAGEE				SCHEDULED ITEM NUMBER:	
☐ LIENHOLDER				OTHER	
☐ BREACH OF WARRANTY					
☐ LEASEBACK OWNER				REASON FOR INTEREST	
☐ CO-OWNER		PHONE (A/C, No, Ext):			
☐		FAX (A/C, No):			
LIEN AMOUNT		E-MAIL ADDRESS:		INTEREST END DATE	
		REFERENCE #:			

COVERAGES

COVERAGE	OPTIONS	LIMIT	APPLIES TO	DEDUCTIBLE	APPLIES TO	PREMIUM
PREMISES LIABILITY		$ $ $	BI EA PERS EA OCC PD	$		$
PREMISES MEDICAL PAYMENTS		$ $	EA PERS EA OCC			$
PRODUCTS LIABILITY	SALE OF FUEL & OIL EXTENDED	$ $ $	BI EA PERS EA OCC AGGR			$
COMPLETED OPERATIONS LIABILITY	EXTENDED	$ $ $	BI EA PERS EA OCC AGGR			$
HANGARKEEPERS LEGAL LIABILITY	INCLUDING TAXI IN FLIGHT	$ $	EA AIRCRAFT EA OCC	$ $		$
FIRE LEGAL LIABILITY		$	ANY ONE FIRE			$
PERSONAL INJURY LIABILITY		$ $	EA OCC AGGR			$
ADVERTISING LIABILITY		$ $	EA OCC AGGR			$
CONTRACTUAL LIABILITY	INCLUDED EXCLUDED					

COVERAGE							
CODE	DESCRIPTION	OPTIONS	LIMIT	APPLIES TO	DEDUCTIBLE	APPLIES TO	PREMIUM
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$
			$ $		$ $		$

GENERAL INFORMATION

EXPLAIN ALL "YES" RESPONSES	YES	NO
1. ANY AIRCRAFT OTHER THAN SINGLE ENGINE OR MULTI-ENGINE MAINTAINED, SERVICED OR REPAIRED BY APPLICANT? If "YES", enter number and type(s) of other aircraft.	☐	☐
2. ARE AIRCRAFT OWNERS PERMITTED TO PERFORM ANY REPAIR SERVICE OR INSPECTION OF AIRCRAFT UNDER SUPERVISION?	☐	☐
3. HIGHEST VALUE OF AIRCRAFT MAINTAINED, SERVICED OR REPAIRED: $		
4. DOES THE APPLICANT PERFORM ENGINE OVERHAULS?	☐	☐
5. DOES THE APPLICANT PERFORM PROPELLER OVERHAULS?	☐	☐
6. DOES THE APPLICANT PERFORM MAJOR AIRFRAME STRUCTURAL REPAIRS?	☐	☐
7. DOES THE APPLICANT PERFORM AIRCRAFT PAINTING?	☐	☐
8. DOES THE APPLICANT PARTICIPATE IN THE NATIONAL AIR TRANSPORTATION ASSOCIATION (NATA) SAFETY FIRST PROGRAM?	☐	☐