PILOT EXPERIENCE FORM PAGE 1 OF 3



PILOT'S NAME:		MAILING AD	DRESS:					
EMAIL:		PHONE:			CELLPHONE:			
AGE:	DRIVER'S LICENSE S	TATE:	DRIVER'S LICENSE NUMBER:					
PRESENT EMPLOYER:			DATE EMPLOYED: FULL OR PART T		ME: POSITION HELD:			
PERCENT OF TIME SPENT ON NON-FLYING DUTIES:			EDUCATION (HIGHEST LEVEL COMPLETED):			PLETED):		
FAA AIRMAN CERTIFICATE NUMBER:			DATE OF LAST FAA FLIGHT PHYSICAL:			CLASS OF MEDICAL CERTIFICATE HELD:		
WAIVERS, LIMITATIONS, OR COND				PHYSICAL IMPAIRMENTS:				
DATE OF LAST FAA PILOT PROFICIENCY CHECK (BFR):			TYPE AIRCRAFT USED FOR PROFICIENCY CHECK:			DATE OF LAST INSTRUMENT PROFICIENCY CHECK:		
•		□ STUDENT □ PRIVATE			□ CFI-I □ CFI-ME	□ ATP SEL □ ATP MEL		
			INGLE ENGINE LAND INCLUDING INCLUDIN		ENT NGINE SEA	□ HELICOPTE □ OTHER:	R	
AIRCRAFT (TYPE RATINGS): MECHANIC				& POWERPLANT (A+P) N AUTHORIZATION (IA)				
TOTAL HOU PILOT IN CO		OMMAND:		TURBO PROP: Turbo jet: Hours last 12 months in all air		RCRAFT:		

PILOT EXPERIENCE FORM PAGE 2 OF 3



BREAKDOWN OF LOGGED PILOT IN COMMAND HO	URS				
SINGLE ENGINE FIXED GEAR:		FIXED WING TURBO PROP:	HELICOPTER - RECIPROCATING POWERED:		
SINGLE ENGINE RETRACTABLE GEAR:		FIXED WING TURBO JET:	HELICOPTER - TURBINE POWERED:		
MULTI-ENGINE UNDER 12,500 LBS:		INSTRUMENT FLYING:	INSTRUMENT FLYING, LAST 12 MONTHS:		
MULTI-ENGINE OVER 12,500 LBS:		AERIAL APPLICATION:	MILITARY HOURS LOGGED:		
SINGLE PILOT HOURS LOGGED IN AIRCRAFT REQUIRING A TYPE RATING:		CONVENTIAL GEAR (TAILWHEEL):	ARE PILOT HOURS DOCUMENTED IN PILOT LOG BOOK?		
AIRCRAFT YOU ARE REQUESTING INSURANCE APP	ROVAL TO	OPERATE	_		
AIRCRAFT 1, MAKE & MODEL:		TOTAL HOURS FOR THIS AIRCRAFT:	HOURS LAST 12 MONTHS FOR THIS AIRCRAFT:		
AIRCRAFT 2, MAKE & MODEL:		TOTAL HOURS FOR THIS AIRCRAFT:	HOURS LAST 12 MONTHS FOR THIS AIRCRAFT:		
AIRCRAFT 3, MAKE & MODEL:		TOTAL HOURS FOR THIS AIRCRAFT:	HOURS LAST 12 MONTHS FOR THIS AIRCRAFT:		
AIRCRAFT 4, MAKE & MODEL:		TOTAL HOURS FOR THIS AIRCRAFT:	HOURS LAST 12 MONTHS FOR THIS AIRCRAFT:		
TRAINING COURSES COMPLETED IN THE LAST 2 YE	ARS				
MAKE & MODEL:		DL:	DATE COMPLETED:		
	COUR	SE:			
MAKE & MODEL: SCHOOL COURS		DL:	DATE COMPLETED:		
		SE:			
MAKE & MODEL: SCHOOL COURS		DL:	DATE COMPLETED:		
		SE:			
MAKE & MODEL:		DL:	DATE COMPLETED:		
	COUR	SE:			
			I		

PILOT EXPERIENCE FORM PAGE 3 OF 3



LOSS HISTORY											
As pilot-in-command or co-pilot have you ever had an aircraft claim, incident or accident, or been cited or fined for violation of any aviation regulation of any country?	YES		NO								
Has any FAA, Transport Canada, or military pilot certificate ever been suspended or revoked?	YES		NO								
Have you ever been convicted of a felony or are you under indictment for a felony?	YES		NO								
Have you ever been arrested, convicted of or pleaded guilty to a charge of reckless driving or driving a motor vehicleunder the influence of alcohol or narcotics?	YES		NO								
Has your driver's license ever been suspended or revoked?	YES		NO								
Have you ever been convicted of or are you under indictment in a legal action involving drugs or narcotics?	YES		NO								
Has any insurance company or underwriter cancelled, declined, or refused to renew any insurance on your behalf?	YES		NO								
FRAUD WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.											
Pilot's Signature: Today's Date:											
MUST BE SIGNED BY HAND OR WITH AN APPROVED E-SIGNATURE				_							
** THIS PILOT EXPERIENCE FORM IS FILED IN CONNECTION WITH POLICYHOLDER/AIRCRAFT OWNER:											