ACORD	PILOT EXPERIENCE															DATE (MM/DD/YYYY)					
AGENCY	APPLIC	APPLICANT (First Named Insured)																			
AGENOT								ALLEG	,AIVI	(1 1131 14	amed n	isureu									
	PILOT N	PILOT NAME AND ADDRESS								ILOT#											
PHONE (A/C, No, Ext):																					
FAX (A/C, No):	HOME	HOME PHONE (A/C, No):																			
E-MAIL ADDRESS:										BUSINESS PHONE (A/C, No, Ext):											
CODE: SUB CODE:										lo):											
AGENCY CUSTOMER	E-MAIL	ADD	DRESS:																		
PILOT INFORMA	ATION							•													
DATE OF BIRTH	BIRTH MARITAL STATUS AOPA N				NUMBER				EAA NUMBER			AIRMAN'S CERTIF									
CURRENT EMPLOYER HIRE I				DATE	OCCUPATION						REGIST	RATIO	N NUMB	ERS OF AS	SSIGNED AIRCR	AFT					
CERTIFICATIONS AND RATINGS (Check the app						boxe	es for all	certifica	certifications / lic			s and	d ratin	as held)	eld)						
	SINGLE ENGINE LAND	MULTI- ENGINE LAND	INSTRU- MENT	SINGLE ENGINE SEA	MU	JLTI- GINE SEA	ROTOR- WING	GLIDER	,	LIGHTEI THAN AI	₹	OTHER:			OTHER:		OTHER:				
STUDENT		N/A	N/A	N/A	A N/A																
RECREATIONAL		N/A	N/A	N/A	ı	N/A	N/A			N/A											
SPORT		N/A	N/A		1	N/A				N/A											
PRIVATE					1]			
COMMERCIAL					1]			
ATP					[N/A]			
INSTRUCTOR					1]			
					[
ARE YOU AN A&P ME	CHANIC? If "	YES", enter	date obtained	l.							YE	S	NO	DAT	ΓE:						
ARE YOU AN INSPECT	TION AUTHOR	RITY (I/A)? I	f "YES", enter	date obtai	ned.						YE	S	NO	DAT	ΓE:						
MEDICAL DATE:		C	CLASS:	I 🗆	II			FLIGHT I	REVI	EW [DATE:			AIRCR	AFT TYPE:						
LOGGED HOUR														П	T			Г			
T0741 11011D0	# HRS				HRS	TURBINE AGRICU			# HRS		TUDDO IET		# HRS				# HRS				
TOTAL HOURS PILOT IN COMMAND		TOTAL SEAPLANE				ROTO					URBO JET URBO PROP										
SEC IN COMMAND		MULTI-ENGINE SEAPLANE					WING AG														
MULTI-ENGINE LAND						ALAS		WING AG			SE TURBO PROF										
RETRACTABLE GEAR				2			UMENT				LAST 12 MONTH										
			GRICULTURE				L TURBINE					2 101014	1110								
					more			auired)													
AIRCRAFT APPROVAL (Attach Additional Sheets						LOGGED HOURS				ANNUAL CU											
AIRCRAFT					TOTAL		LAST 0 DAYS	LAST 12 MOS.					TRAINING FACILITY			TRAINING DATE					
MAKE:										YES		YES									
MODEL:										NO		NO									
MAKE:										YES		YES									
MODEL:										NO		NO									
MAKE:										YES		YES									
MODEL:										NO		NO									
MAKE:										YES		YES									
MODEL:										NO		NO									
MAKE:										YES	<u> </u>	YES									
MODEL:									+	NO	-	NO									
MAKE:										YES		YES									
MODEL:									-	NO	+	NO	-								
MAKE: MODEL:									-	YES	-	YES									
MAKE:									+	NO YES	+	NO YES									
MODEL:										NO	\vdash	NO									

GENERAL INFORMATION EXPLAIN ALL "YES" RESPONSES YES NO 1. DO YOU PARTICIPATE IN THE FAA PILOT PROFICIENCY AWARD PROGRAM? If "YES", complete the following and attach certificate. HIGHEST PHASE NUMBER COMPLETED: AIRCRAFT USED: COMPLETION DATE: 2. LIST REFRESHER COURSES INCLUDING DATES OF THE LAST COURSE ATTENDED: COURSE NAME COURSE NAME DATE 3. DO YOU HAVE ANY PHYSICAL IMPAIRMENTS OR WAIVERS ON MEDICAL CERTIFICATE? 4. HAVE YOU EVER HAD AN AIRCRAFT ACCIDENT OR INCIDENT OR BEEN PENALIZED FOR ANY FAR VIOLATION? 5. HAS ANY INSURANCE COMPANY OR UNDERWRITER CANCELLED OR REFUSED TO RENEW ANY INSURANCE ON YOUR BEHALF? (Not applicable in MO) 6. HAVE YOU EVER BEEN CONVICTED OF DRIVING A MOTOR VEHICLE WHILE UNDER THE INFLUENCE OF ALCOHOL OR NARCOTICS, OR OF RECKLESS DRIVING? 7. HAS ANY DRIVERS LICENSE BEEN SUSPENDED OR REVOKED? 8. HAVE YOU EVER BEEN CONVICTED OF OR ARE YOU UNDER INDICTMENT IN A LEGAL ACTION INVOLVING DRUGS OR NARCOTICS? ANY PERSON WHO KNOWINGLY AND WITH INTENT TO DEFRAUD ANY INSURANCE COMPANY OR ANOTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM 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 THE PERSON TO CRIMINAL AND (NY:SUBSTANTIAL) CIVIL PENALTIES. (Not applicable in CO, HI, NE, OH, OK, OR or VT; in DC, LA, ME, TN and VA insurance benefits may also be denied) PILOT'S SIGNATURE DATE **REMARKS**