

Aircraft Insurance

Private

In arranging your insurance both we and the Insurers will ask a number of questions which you are required to answer. It is your duty to take reasonable care to answer all the questions accurately and honestly, to the best of your knowledge, and to provide full answers and relevant details. Before completing this risk questionnaire, please read the section entitled "Your Duty in Relation to the Questions Asked" on the last page of this document.

ABOUT YOU	
NAME	
ADDRESS	
POSTCODE	TELEPHONE
MOBILE	EMAIL

YOUR AIRCRAFT					
Aircraft make and model (including if fixed gear or retractable)	Registration and year of manufacture	Agreed value	Maximum takeoff weight	Maximum number of passenger seats	Estimated utilisation (hours per annum per aircraft)

PILOT INFORMATION (Please provide details for all pilots who will fly the aircraft)							
Name	Date of birth	Total flying hours	Total fixed wing piston flying hours	Total hours on similar type of aircraft i.e. tailwheel/tricycle etc.	Total flying hours on model of aircraft to be insured	Total hours in the last 12 months	Licences/ratings/endorsements and date(s) obtained

Please advise the name of the pilot with the lowest aerobatic hours (if applicable):

Please state the total aerobatic hours for this pilot:

USES (Please describe exactly what the aircraft will be used for)			
Private	<input type="radio"/> Yes <input type="radio"/> No	Continuation training of Named Pilots	<input type="radio"/> Yes <input type="radio"/> No
Rental (any pilot)	<input type="radio"/> Yes <input type="radio"/> No	Ab Initio Instruction	<input type="radio"/> Yes <input type="radio"/> No
Rental (to named pilots)	<input type="radio"/> Yes <input type="radio"/> No	Air Displays	<input type="radio"/> Yes <input type="radio"/> No
Aerobatics (Please advise if under 1,000Ft above ground level)	<input type="radio"/> Yes <input type="radio"/> No	Aerial Photography (Please advise if under 1,500Ft above ground level)	<input type="radio"/> Yes <input type="radio"/> No
Commercial passenger carriage		<input type="radio"/> Yes <input type="radio"/> No	
Club		<input type="radio"/> Yes <input type="radio"/> No	
Competitions		<input type="radio"/> Yes <input type="radio"/> No	
Please list any other uses not stated:			

GEOGRAPHICAL LIMITS (Please describe exactly where you intend to fly the aircraft):

AIRCRAFT LIABILITY	YES	NO
Do you require a limit of liability greater than the limits set out in EC785/2004?	<input type="radio"/>	<input type="radio"/>
If yes, please state limit of liability required:		

IMPORTANT ADDITIONAL INFORMATION ABOUT THE AIRCRAFT	YES	NO
Where is/are the aircraft based?		
Is/are the aircraft hangared?	<input type="radio"/>	<input type="radio"/>
Is/are there any finance on the aircraft:	<input type="radio"/>	<input type="radio"/>
If yes, please provide the name of the Finance Company for each aircraft:		
Details of any losses/claims within the last five years of the Insured or any pilot insured to fly the above aircraft: Please advise: date of loss, registration, aircraft value, total amount paid (split between damage to aircraft and liability):		
Has the Insured ever had any aviation insurance declined, cancelled or had any special terms imposed?	<input type="radio"/>	<input type="radio"/>
If yes, please provide details:		
Existing Insurers:		
Current renewal date:		

Your insurance quotation is based on the information you have given us. If any of the information you have provided above changes either prior to inception or during the policy period you must notify us immediately. Updating and/or changing information will not automatically result in a change to your policy cover or the cost of insurance, but failure to notify us may invalidate your policy.

SIGNED	DATE
NAME	

Your Duty in Relation to the Questions Asked

You must take reasonable care to provide complete and accurate answers to the questions we ask. Please read any assumptions carefully and confirm if they apply to your circumstances.

Please tell us within 14 days of you becoming aware if the information provided by you changes after you purchase your policy and during the period of your policy. If you do not provide us with complete and accurate information which is subsequently disclosed, or comes to light after the commencement date of the insurance, your insurer may consider that you have misrepresented your risk and could either revise the premium and/or change any excess, or the extent of cover may be affected, cancel your policy or refuse to pay claims or both.

Your Data Matters

Arthur J. Gallagher (UK) Limited is the data controller of any personal data you provide to us. We collect and process personal data in order to offer and provide insurance services and policies and to process claims. Personal data is also used for business purposes such as fraud prevention and detection, financial management, to generate risk modelling, conduct analytics including to advise, improve and develop our products and services and to comply with our legal and regulatory obligations.

This may involve sharing information with, and obtaining information from, our group companies and third parties such as (re)insurers, other brokers, loss adjusters, credit reference agencies, service providers, professional advisors, our regulators or fraud prevention agencies. We may record telephone calls to help us to monitor and improve the service we provide as well as for regulatory purposes.

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If you are providing us with personal data of another individual that would be covered under the insurance policy we may be placing or services we may provide to you, you shall ensure that you have obtained all appropriate consents, where required, tell them you are providing their information to us and show them a copy of this notice. You must not share personal data with us that is not necessary for us to offer, provide or administer our services to you.

Connect With Us

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