



PERSONAL NON-OWNED AIRCRAFT LIABILITY APPLICATION

IMPORTANT: This coverage is for your personal and non-commercial use of the aircraft that are owned and operated by the Coleman AeroClub. Personal liability or any other types of insurance are not included in this program. Coverage is designed to defray the costs of the deductible only, currently EUR2000.00. Purchasing this coverage will not remove any further financial liability of any kind to third parties that are not covered by the EUR2000.00 deductible or the club's insurance policy; furthermore cases of Gross Negligence will not be covered by this agreement and possibly not covered by the club's current insurance policy. Cases of Gross Negligence will be determined by the insurance company, Allianz AG. The total annual cost of coverage for one year is \$125.00.

1. Policyholder Information:

Name: _____
Address: _____ Home Phone: _____
_____ Work Phone: _____
_____ Email: _____

Please start my coverage on ____/____/____, however I realize coverage will only become effective upon receipt and approval of this application and provided I have paid in full.

2. Your Pilot Information

Birth Day (mm/dd/yyyy): ____/____/____ Pilot Class: _____
IFR Rated Y/N Total Hours: _____
Total Hours PIC: _____ Total Hours Last 12 Months: _____

Within the Last 36 Months Have You* (please circle):

Been involved in any aircraft accident/incident?	YES/NO
Been cited for violation of any Federal Aviation Regulation?	YES/NO
Had your pilot's/driver's license surrendered, suspended or revoked?	YES/NO
Been convicted of operating an aircraft/motor vehicle while under the influence of drug or alcohol?	YES/NO

*If you answered YES to any of these questions, please contact the office as additional information may be required to determine your eligibility.

It is important that you read and understand the following:

All information provided in this application is true and complete to the best of my knowledge and no information has been withheld. I agree that this application and the terms and conditions of this policy in use by the Coleman AeroClub shall be the basis of any contract between me and the Coleman AeroClub. I understand no coverage is in force until the Coleman AeroClub approves my application and I have made full payment of the annual premiums. Annual premiums will be paid prior to receiving coverage and will be paid in full for 12 months of coverage. Premiums are non-refundable and not pro-rated for less than 12 months of coverage. This coverage is solely between myself and the Coleman AeroClub and does not imply any agreement with the aero club's insurance company.