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7 W. Main St., Suite 100
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Aerial Survey / Patrol / Photography Aircraft Application

Name of Applicant: _____

Address: _____

Name of Operator (if other than Applicant): _____

List any FAA, Association or Manufacturer Certifications: _____

Please provide a copy of any aircraft lease or aerial work agreements.

N Number: _____ Year / Make / Model: _____ Total Seats: _____

Insured Value / Purchase Price: _____ Requested Limit of Liability: _____

Home Airport(s): _____

Estimated Annual Flight Hours: Part 91: _____ Aerial Photo/Survey: _____ Part 135: _____

Average Passenger Load: Part 91: _____ Aerial Photo/Survey: _____ Part 135: _____

Please attach a completed Alexander Aviation Pilot History Form for each pilot.

Questionnaire

- 1. Will anyone not named above conduct aerial survey or be paid for the operation of the Applicant's aircraft?
2. Are any of the pilots or photographers not full-time employees or provide pilot services to others more than 20% of the time?
3. Do any of the pilots have any ownership interest in any of the aircraft?
4. Are any pilots or employee passengers not covered by separate Worker's Compensation insurance?
5. Has any pilot logged fewer than 100 flight hours in the preceding 12 months?
6. Does any pilot have fewer than 200 flight hours in the aircraft he or she will be operating?
7. Will any multi-engine aircraft be used for aerial survey operations?
8. Does any multi-engine pilot have fewer than 250 hours in multi-engine aircraft?
9. Are any pilots under 25 years of age?
10. Will the aircraft be operated outside the continental United States?
11. Will any survey operations be conducted on behalf of or on contract to a governmental entity?
12. Will any survey operations be conducted more than 3 miles off-shore?
13. Will any survey operations be conducted at altitudes lower than 1000 feet AGL?
14. Does the applicant own or lease the survey or photography equipment?
15. Will there be a passenger/operator aboard to operate the survey or photography equipment?
16. Are all aircraft equipped with a camera port or other STC-ed modification to enable aerial photography?
17. Does the applicant operate, charter or train in any other aircraft not listed above?
18. Has the applicant, operator or any named pilot had any aviation accidents, incidents, FAR violations, automotive DUI convictions or drug-related convictions within the last 5 years?
19. Have there been any changes in ownership, upper management or chief pilot in the last 12 months?

Please explain all "Yes" answers. Attach additional pages as required.

FRAUD WARNING: Any person who knowingly and with intent to injure, defraud or deceive any insurer files a statement of claims or an application containing any false, incomplete or misleading information is guilty of a felony of the third degree.

UNDERSIGNED AFFIRMS: This information is correct to the best of my/our knowledge and belief and no information is being withheld or suppressed. I authorize the insurance company to make investigations as it may deem appropriate. I appoint Alexander Aviation Associates as my/our Agent of Record for this insurance.

SIGNED:

Applicant: _____ Title: _____ Date: _____