



**RISK MANAGEMENT
COMPANY FOR
INDEPENDANTS
(IRELAND) LIMITED**

11. Where is the operation based?					
12. Geographical areas of operation / Flight routes (with frequencies)					
13. Estimated number of hours to be flown during coming policy period.					
NEXT 12 MONTHS			HOURS PER AIRCRAFT		
14. Who will be maintaining the aircraft?					
15. How will aircraft usually be kept? (I.E. Hangared/Tied down/Open)					
16. Exact uses of Aircraft and estimated utilisation for each different use.					
17. Pilot Information / Experience – (Per pilot)					
	Pilot 1	Pilot 2	Pilot 3	Pilot 4	Pilot 5
Name and age					
Licences / Rating Held					
Last Medical / ECG					
Hours / In command					
Hours / Make and model					
Total hours					
Detail of any potential previous losses					



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18. Details of all losses last five years and any events which may give rise to potential losses.
19. Any other information which may be of interest to potential underwriters.
20. Will Hull war risks coverage be required?
21. If spares coverage is required, please advise the maximum value of any spares at risk at any one time / Location, with brief details of what spares consist.
22. When will coverage be required to incept?

The undersigned declares that, to the best of his knowledge, all the above information is true and correct and allows that it be used for the establishment of the policy he may buy.

Signed: _____

Date: _____