



PROPERTY INSURANCE APPLICATION

General Information:

Exact Name of Applicant _____
 Street or P.O. Box _____ Effective Date _____
 City, State & Zip _____
 Contact _____ Telephone _____
 Business or occupation of applicant : _____

Property Description & Coverage Schedule:

	Building #1	Building #2	Building #3
Building	\$	\$	\$
Contents	\$	\$	\$
Tools	\$	\$	\$
Mobile Equipment	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
Area in Square Feet			
Type Construction - Building			
Type Construction - Roof			
Year Construction - Building			

Airport Name _____ **Identifier** _____

Address of Building _____
 Protection Class _____ Airport Fenced: Yes / No-; Alarm System: Yes / No – Type _____
 Fire Department on Airport: Yes / No; Distance to Fire Department _____ Tower: Yes / No – Hours _____
 Repair and Service Work or painting in Hangar: Yes / No Describe: _____
 Painting in Hangar: Yes / No – Describe: _____
 Occupancy (Type of Contents Kept in Building) _____

Name and Address of Mortgagee: _____

Additional Insured:	Name	Reason
	_____	_____
	_____	_____

Prior Insurance (Last 3 years):

Policy Term	Name of Company	Policy Number	Premium

Loss Detail (Last 3 years): _____ NONE _____

Signature of Applicant _____ **Date** _____