



Application For Renter's Aircraft Insurance

IMPORTANT: This insurance is for your Personal and non-commercial use of rented fixed wing, non-pressurized, land aircraft having a non-turbine single engine of 450 horsepower or less (including non-powered sailplanes) and capacity for no more than seven (7) total passengers and/or seats, and a "Standard" Airworthiness Certificate and not furnished to you for more than thirty (30) consecutive days or under a lease and/or purchase agreement to you or your spouse, parent, child, corporation, partnership, or other organization in which any of these entities own more than twenty percent. Multi-engine and rotorwing aircraft are not included in this coverage. For multi-engine and rotorwing rented coverage, please contact AOPA Insurance Services at 1-800-622-AOPA [2672].

1 Pilot Information One individual only. No corporations.

All fields must be completed.

AOPA Membership #: _____

Name _____

Street _____

City _____ State _____ Zip _____

Phone (H) _____ (W) _____

(C) _____

E-mail address _____

Birthdate _____ Occupation _____

Describe type of rented aircraft you usually fly: _____

Your hours as PIC in type: _____

Pilot Certificate: Student Recreational Sport Private Commercial ATP

Logged Hours: (Total) _____ (Last 12 Months) _____

Within the Last 36 Months Have You*:

Been involved in any aircraft accident/incident or aviation insurance claim? No Yes

Been cited for violation of any Federal Aviation Regulation? No Yes

Had your pilot's/driver's license surrendered, suspended or revoked? No Yes

Been convicted of operating an aircraft or motor vehicle while under the influence of drugs or alcohol? No Yes

*If you answered yes to any of these questions, please call AOPA Insurance Services at 1-800-622-AOPA [2672]. Additional information may be required to determine your eligibility for this insurance program.

NOTE: For coverage in Hawaii, Kentucky or Alaska, please contact AOPA Insurance Services at 1-800-622-AOPA [2672], as the prices listed do not apply. Not available to pilots under the age of 14.

2 Required Coverage Bodily Injury/Property Damage Liability

Protects against claims for Bodily Injury and Property Damage that may occur while operating a rented aircraft. Damage to the rented aircraft is not covered, but can be purchased below.

	Each Occurrence	Passenger Sub-Limit	Non-Member Rate	AOPA Member Rate
<input type="checkbox"/>	\$ 250,000	\$ 25,000	\$ 86	\$ 81
<input type="checkbox"/>	\$ 500,000	\$ 50,000	\$ 116	\$ 109
<input type="checkbox"/>	\$ 500,000	\$100,000	\$ 181	\$ 172
<input type="checkbox"/>	\$1,000,000	\$100,000	\$ 220	\$ 209

3 Optional Coverage

A Liability Limit Desired For Damage To Rented Aircraft: Decline

Protects against claims for damage to the rented aircraft, including its loss of use and \$5,000 of no-fault deductible coverage. May be purchased only if required coverage above is also purchased.

	Limit of Liability	Non-Member Rate	AOPA Member Rate
<input type="checkbox"/>	\$ 5,000	\$ 99	\$ 94
<input type="checkbox"/>	\$ 10,000	\$ 175	\$ 166
<input type="checkbox"/>	\$ 20,000	\$ 250	\$ 238
<input type="checkbox"/>	\$ 30,000	\$ 350	\$ 333
<input type="checkbox"/>	\$ 40,000	\$ 450	\$ 428
<input type="checkbox"/>	\$ 60,000	\$ 600	\$ 570
<input type="checkbox"/>	\$ 80,000	\$ 775	\$ 736
<input type="checkbox"/>	\$ 100,000	\$ 975	\$ 926
<input type="checkbox"/>	\$ 150,000	\$ 1,425	\$ 1,354
<input type="checkbox"/>	\$ 200,000	\$ 1,900	\$ 1,805

B Additional Premium for Employer as Additional Insured*

Employer Name: _____ \$50/yr

Employer Address: _____

C Civil Air Patrol Coverage (optional):

Includes civil air patrol missions defined as flights in conjunction with or on behalf of the Civil Air Patrol. Civil Air Patrol uses include search & rescue missions, aerial photography, courier flights and aerial surveillance flights ordered by a corporate officer of the Civil Air Patrol or his/her designee.

I hereby elect to purchase CAP coverage \$50/yr

4 Premium Calculation

	Annual Premium
2. Required Coverage (Bodily Injury/Property Damage Liability)	\$
3. Optional Coverage A (Damage to Rented Aircraft)	\$
Optional Coverage B (Add'l Insurance for Employer)	\$
Optional Coverage C (CAP Coverage)	\$
Tax (Applicable in: FL 1.3%; NJ 0.9%; WV 0.55%)	\$
TOTAL	\$

Rates are subject to change.

5 Payment Information

Please start my coverage on ____/____/____; however, I realize my policy will only become effective upon receipt and approval of this application by the Company; my medical and pilot certificates are current with necessary ratings required by the FAA; and when I have paid the premium in full.

I've enclosed a check for the total premium amount, payable to AOPA Insurance Services.

I am requesting that AOPA Insurance Services call me so I may pay by credit card.

Please charge my: VISA MasterCard American Express

Name on Card _____

Cardholder Billing Address _____

Account No. _____

Card Security Code (3-4 digit code on back of card) _____

Expiration Date _____

The premium is 50% fully earned at inception date of the policy. The maximum that can be returned is 50% of the total premium if the policy is cancelled.

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 the policy in use by the insurance company shall be the basis of any contract between the insurance company and me. I understand that no insurance is in force unless and until the insurance company or its authorized agent effects a binder of insurance or issues a policy. I authorize the insurance company or its authorized agent to investigate the qualifications or statements contained herein.

Signature _____ Date _____

Guardian Signature _____ Date _____

If you are under the age of 18, a legal guardian must also sign and date this application.

Coverage underwritten by:
AIG Property & Casualty - Aerospace
See Fraud Warnings.

STATE FRAUD WARNINGS

NOTICE TO APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD AN INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH IS A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO ARKANSAS, NEW MEXICO AND WEST VIRGINIA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT, OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO COLORADO APPLICANTS: IT IS UNLAWFUL TO KNOWINGLY PROVIDE FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF FRAUDULATING OR ATTEMPTING TO FRAUD THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES, DENIAL OF INSURANCE, AND CIVIL DAMAGES. ANY INSURANCE COMPANY OR AGENT OF AN INSURANCE COMPANY WHO KNOWINGLY PROVIDES FALSE, INCOMPLETE, OR MISLEADING FACTS OR INFORMATION TO A POLICYHOLDER OR CLAIMANT FOR THE PURPOSE OF FRAUDULATING OR ATTEMPTING TO FRAUD THE POLICYHOLDER OR CLAIMANT WITH REGARD TO A SETTLEMENT OR AWARD PAYABLE FROM INSURANCE PROCEEDS SHALL BE REPORTED TO THE COLORADO DIVISION OF INSURANCE WITHIN THE DEPARTMENT OF REGULATORY AUTHORITIES.

NOTICE TO DISTRICT OF COLUMBIA APPLICANTS: WARNING: IT IS A CRIME TO PROVIDE FALSE OR MISLEADING INFORMATION TO AN INSURER FOR THE PURPOSE OF FRAUDULATING THE INSURER OR ANY OTHER PERSON. PENALTIES INCLUDE IMPRISONMENT AND/OR FINES. IN ADDITION, AN INSURER MAY DENY INSURANCE BENEFITS IF FALSE INFORMATION MATERIALLY RELATED TO A CLAIM WAS PROVIDED BY THE APPLICANT.

NOTICE TO FLORIDA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, FRAUD, OR DECEIVE ANY INSURER FILES A STATEMENT OF CLAIM OR AN APPLICATION CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY OF THE THIRD DEGREE.

NOTICE TO KANSAS APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD, PRESENTS, CAUSES TO BE PRESENTED OR PREPARED WITH KNOWLEDGE OR BELIEF THAT IT WILL BE PRESENTED TO OR BY AN INSURER, PURPORTED INSURER, BROKER OR ANY AGENT THEREOF, ANY WRITTEN STATEMENT AS PART OF, OR IN SUPPORT OF, AN APPLICATION FOR THE ISSUANCE OF, OR THE RATING OF AN INSURANCE POLICY FOR PERSONAL OR COMMERCIAL INSURANCE, OR A CLAIM FOR PAYMENT OR OTHER BENEFIT PURSUANT TO AN INSURANCE POLICY FOR COMMERCIAL OR PERSONAL INSURANCE, WHICH SUCH PERSON KNOWS TO CONTAIN MATERIAL FALSE INFORMATION CONCERNING ANY FACT MATERIAL THERETO, OR CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT.

NOTICE TO KENTUCKY APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD AN INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME.

NOTICE TO LOUISIANA APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR KNOWINGLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO MAINE APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF FRAUDULATING THE COMPANY. PENALTIES MAY INCLUDE IMPRISONMENT, FINES OR A DENIAL OF INSURANCE BENEFITS.

NOTICE TO MARYLAND APPLICANTS: ANY PERSON WHO KNOWINGLY AND WILLFULLY PRESENTS A FALSE OR FRAUDULENT CLAIM FOR PAYMENT OF A LOSS OR BENEFIT OR WHO KNOWINGLY AND WILLFULLY PRESENTS FALSE INFORMATION IN AN APPLICATION FOR INSURANCE IS GUILTY OF A CRIME AND MAY BE SUBJECT TO FINES AND CONFINEMENT IN PRISON.

NOTICE TO MINNESOTA APPLICANTS: A PERSON WHO FILES A CLAIM WITH INTENT TO FRAUD OR HELPS COMMIT A FRAUD AGAINST AN INSURER IS GUILTY OF A CRIME.

NOTICE TO NEW JERSEY APPLICANTS: ANY PERSON WHO INCLUDES ANY FALSE OR MISLEADING INFORMATION ON AN APPLICATION FOR AN INSURANCE POLICY IS SUBJECT TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO NEW YORK APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD AN INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION, OR CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME, AND SHALL ALSO BE SUBJECT TO A CIVIL PENALTY NOT TO EXCEED FIVE THOUSAND DOLLARS AND THE STATED VALUE OF THE CLAIM FOR EACH SUCH VIOLATION.

NOTICE TO OHIO APPLICANTS: ANY PERSON WHO, WITH INTENT TO FRAUD OR KNOWING THAT HE IS FACILITATING A FRAUD AGAINST AN INSURER, SUBMITS AN APPLICATION OR FILES A CLAIM CONTAINING A FALSE OR DECEPTIVE STATEMENT IS GUILTY OF INSURANCE FRAUD.

NOTICE TO OKLAHOMA APPLICANTS: WARNING: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO INJURE, FRAUD, OR DECEIVE ANY INSURER, MAKES ANY CLAIM FOR THE PROCEEDS OF AN INSURANCE POLICY CONTAINING ANY FALSE, INCOMPLETE OR MISLEADING INFORMATION IS GUILTY OF A FELONY (365:15-1-10, 36 §3613.1).

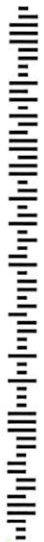
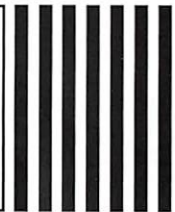
NOTICE TO OREGON APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD AN INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS, FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO, COMMITS A FRAUDULENT ACT, WHICH MAY BE A CRIME AND MAY SUBJECT SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO PENNSYLVANIA APPLICANTS: ANY PERSON WHO KNOWINGLY AND WITH INTENT TO FRAUD AN INSURANCE COMPANY OR OTHER PERSON FILES AN APPLICATION FOR INSURANCE OR STATEMENT OF CLAIM CONTAINING ANY MATERIALLY FALSE INFORMATION OR, CONCEALS FOR THE PURPOSE OF MISLEADING, INFORMATION CONCERNING ANY FACT MATERIAL THERETO COMMITS A FRAUDULENT INSURANCE ACT, WHICH IS A CRIME AND SUBJECTS SUCH PERSON TO CRIMINAL AND CIVIL PENALTIES.

NOTICE TO TENNESSEE, VIRGINIA AND WASHINGTON APPLICANTS: IT IS A CRIME TO KNOWINGLY PROVIDE FALSE, INCOMPLETE OR MISLEADING INFORMATION TO AN INSURANCE COMPANY FOR THE PURPOSE OF FRAUDULATING THE COMPANY. PENALTIES INCLUDE IMPRISONMENT, FINES AND DENIAL OF INSURANCE BENEFITS.

NOTICE TO VERMONT APPLICANTS: ANY PERSON WHO KNOWINGLY PRESENTS A FALSE STATEMENT IN AN APPLICATION FOR INSURANCE MAY BE GUILTY OF A CRIMINAL OFFENSE AND SUBJECT TO PENALTIES UNDER STATE LAW.

NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL
FIRST-CLASS MAIL PERMIT NO. 5886 WICHITA KS

POSTAGE WILL BE PAID BY ADDRESSEE



INSURANCE SERVICES | AVIATION

PO BOX 9170
WICHITA KS 67277-9870



Aircraft Renter Liability Insurance

*Protection for Pilots
who rent or borrow aircraft*



INSURANCE SERVICES | AVIATION

Affordable and Easy-to-Get Protection for When You Fly

Renter's Insurance through AOPA Insurance Services is the best way to protect yourself when renting or borrowing aircraft. It's affordable, comprehensive and easy-to-get! Go to aopainsurance.org/rent, call **1-800-622-AOPA [2672]** or mail the attached application. Here are some commonly asked questions:

Q. Why do I need Renter's Insurance?

A. You don't want to fly without it. Renter's Insurance protects renters and borrowers of aircraft from liability should an event or incident occur while they are operating the aircraft. *Expenses to repair aircraft or other damaged property can be sizeable.* Flying without this protection can put you at a big financial risk.

Q. My FBO (or friend) tells me they have insurance. Does that cover me?

A. Unfortunately, the answer is almost always no. FBO coverage typically is not extended to renter pilots. Plus, rental agreements usually hold you responsible for damages. When FBOs do provide coverage, it is extremely limited and does not provide you protection for damage you may cause to the aircraft. Your friend's insurance will not protect you either — unless several steps are taken to specifically endorse their policy. For all these reasons, you are best protected by having your **own** coverage.

Q. I only fly three times a year. Do I still need it?

A. Yes. Even common ground events like wingtip damage can be expensive. *That's why AOPA recommends that every renter or borrower have Renter's Insurance.*

Q. Is Renter's Insurance expensive?

A. It can be relatively inexpensive. AOPA has negotiated low rates for pilots — so you can get Renter's Insurance starting at *just \$81/year* (for Liability-only Insurance). Comprehensive Coverage starts at *just \$175/year*. When you consider the financial risk of flying uninsured, Renter's Insurance is *very reasonable...and well worth it.*

Q. Why should I get coverage through AOPA Insurance Services?

A. You won't find better coverage at a better price. We specialize in renter's coverage and understand the needs of pilots. We offer you **affordable rates**, a variety of options and broad liability coverages coupled with experienced aviation Legal Defense.

Plus, by selecting to purchase your insurance coverage through AOPA Insurance Services you are personally helping to ensure valuable revenue which AOPA reinvests to keep airports open, fight user fees and encourage growth in general aviation.



Q. Are there extra savings for AOPA members?

A. Of course. AOPA members get an **additional 5% savings and a 10% additional discount** upon renewal (if claims-free record is maintained) in addition to exceptional service from AOPA Insurance Services.

Q. How much coverage should I have?

A. For Bodily Injury and Property Damage Liability (Required) coverage, you should get as much as you can afford. For physical damage to a rented or non-owned aircraft, it depends on the value of the aircraft you typically fly and what your rental agreement obligations state. You can talk with our insurance advocates to help you determine what might be best for you when you call us at 1-800-622-AOPA [2672].

Q. How do I get it?

A. That's easy! Just fill out the enclosed form and send it in the postage-paid envelope provided today or go online at aopainsurance.org/rent. You can also call 1-800-622-AOPA [2672].

► **Get protected today!**
Go to aopainsurance.org/rent.
Call **1-800-622-AOPA [2672]**
or mail the attached form.