



Optimum Ges.m.b.H.
Versicherungsmakler

Aircraft Proposal Form

If insufficient space provided please identify and attach separate sheet(s)

Name of Insured	
Address of Insured	
Business or Occupation	
Telephone Number	
Facsimile Number	

Details of Aircraft

Number of aircraft to be proposed	
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(please attach additional sheets if insufficient space provided)

1. Manufacturer	
2. Type and Variant	
3. MTOW	
4. Registration marks	
5. Present value	

Pilot Details

Number of pilots to be proposed	
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(please attach additional sheets if insufficient space provided)

1. Total hours	
2. Hours on multi engine	
3. Hours on type	
4. Hours on turbine engine aircraft	

General Information

1. Proposed use of the aircraft	
2. Geographical limits for which insurance is required	

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3. Have you previously held a policy of insurance in respect of this or any other aircraft, please give details when and with whom	
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Details of Insurance Required

Period for which Insurance coverage is required	12 months @
Please specify in which currency you wish policy to be issued, if no preference policy will be issued in US\$	
1. Accidental damage to insured aircraft Flight / Taxi / Ground	Sum Insured
2. Third party legal liability Limit of Indemnity	Legal limit if no other limit required
and	
3. Legal liability to passengers* Limit of Indemnity	Legal limit if no other limit required
or	
4. Combined single limit 2 and 3 can be joined to provide a combined single limit if required	

* N.B. The limit of indemnity for any one accident equals the indemnity per passenger multiplied by the declared seating capacity of the aircraft.

Any other information which you may consider useful in enabling us to assess this proposal

Declaration

I/We confirm that the aircraft specified in the foregoing proposal is/are my/our property, and that the statements and particulars given are true, and that no material information has been withheld or suppressed, and I/we agree that this proposal, signed by, or caused to be signed by me/us shall be the basis of and form part of any contract between me/us and the Company, and to accept a Policy subject to the terms, exclusions and conditions contained therein.

Signed

Dated

The completion of this proposal form in no way binds the proposer to complete and insurance, but the answers given herein are to form the basis of any insurance contract which may be entered into between the Company and the Proposer

Underwriters reserve the right to decline any proposal without giving a reason

**Attachment of
Additional Aircraft Details**

1. Manufacturer	
2. Type and Variant	
3. Registration marks	
4. Present value	

1. Manufacturer	
2. Type and Variant	
1. Registration marks	
2. Present value	

1. Manufacturer	
2. Type and Variant	
3. Registration marks	
4. Present value	

**Attachment of
Additional Pilot Details**

1. Name	
2. Total hours	
3. Hours on multi engine	
4. Hours on type	
3. Hours on turbine engine aircraft	

1. Name	
2. Total hours	
3. Hours on multi engine	
4. Hours on type	
5. Hours on turbine engine aircraft	

1. Name	
2. Total hours	
3. Hours on multi engine	
4. Hours on type	
6. Hours on turbine engine aircraft	