

HULL & LIABILITY INSURANCE - ROTOR WING QUESTIONNAIRE

1. DETAILS OF INSURED

| | | | |
|-----------------------------|---|---------------------------------|--------|
| Name: | | | |
| Insured as: | | | |
| Telephone No: | | Mobile No: | |
| Facsimile No: | | | |
| Address: | | | |
| Email: | | GST Registered: YES / NO | |
| Operator: | | | |
| Period of Insurance: | / | / | to / / |

2. HELICOPTER DETAILS

| Make and Model | Registration No | Year of Manufacture | Agreed Value |
|----------------|-----------------|---------------------|--------------|
| 1. | | | |
| 2. | | | |
| 3. | | | |
| 4. | | | |
| 5. | | | |

3. ROTOR WING (RW) PILOT DETAILS

| Name and Qualifications | Total RW Hours | Turbine Hours | Piston Hours | Make & Model Hours | **Claims/Accidents last 5 years (On separate sheet if necessary) |
|-------------------------|----------------|---------------|--------------|--------------------|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |

Please state Agricultural / WARS / Slung hours / etc if applicable

4. LIABILITY LIMIT (Please state currency)

| | | | |
|--------------|--|--------------|--------------|
| \$ 1,000,000 | | \$ 2,000,000 | Other |
|--------------|--|--------------|--------------|

| | | | |
|--|----------|-----------------------|-----------|
| Liability to Slung Loads Required | YES / NO | Limit Required | \$ |
|--|----------|-----------------------|-----------|

5. CLAIMS IN LAST FIVE YEARS IN RESPECT OF OPERATION (Please provide full details)

6. LIENHOLDER/INTERESTED PARTY (Please advise if any lienholder/ financially interested party need their interests noted on the policy together with the amount:

7. UTILISATION (approx hours per annum)

| | ZK- | ZK- | ZK- |
|---|-----|-----|-----|
| Private Business and Pleasure (own use) | | | |
| Rental to other Parties * | | | |
| Hire and Reward | | | |
| Frost Protection | | | |
| Scenic and Charter | | | |
| Training (no ab initio) and Type Rating | | | |
| Ab initio training | | | |
| Hunter/Fisherman positioning | | | |
| Lifting out deer carcass for ground hunters | | | |
| Fire Fighting/Lighting | | | |
| Sundry slung loads (including farm lifting) | | | |
| Moss lifting | | | |
| Passenger Transport | | | |
| Log Lifting | | | |
| Aerial Photography | | | |
| Running powerlines | | | |
| Powerline survey | | | |
| Survey/Photography | | | |
| Fish or whale spotting | | | |
| Musterer/shepherd POSITIONING ONLY | | | |
| Mustering | | | |
| Wild Animal Recovery | | | |
| Search and rescue | | | |
| Agricultural spraying and dressing | | | |
| Industrial aid | | | |
| Advertising | | | |
| Sales and demonstration | | | |
| Seismic work | | | |
| | | | |
| Other, not stated above | | | |
| | | | |

*Rental to other parties, please advise full details of renter including uses:

8. CAA CONVICTIONS FOR INSURED AND ALL NAMED PILOTS (if any) (Please provide full details)

9. OTHER ADDITIONAL INFORMATION

Please supply latest CAA Safety report if available.

I declare that the answers I have given are, to the best of my knowledge, true and that I have not withheld any material information that may influence the assessment or acceptance of this insurance

Signed: _____ **Date:** _____

Every Proposer or Insured when seeking a new policy of insurance or cover for additional risks or renewal under an existing policy, must disclose any information including any CAA prosecutions that might influence the insurers in fixing the premium or determining whether to accept the risk. Failure to do so may entitle insurers to void cover from inception and seek repayment of paid claims. If you are in any doubt as to whether information is material, you should disclose it.