



## AVIATION GENERAL LIABILITY LOCATION ADDENDUM

**APPLICANT INFORMATION:**

Name of Applicant:	Current Policy Number:
ADDITIONAL LOCATION	
Airport Name:	
Airport City:	Airport State:
FAA Airport Identifier (if applicable):	

Does this Applicant's location occupy the entire airport?     Yes     No    If "NO", what portion (%): \_\_\_\_\_ %

**LIMITS OF LIABILITY:**

TYPE OF LIMIT	LIMIT	OCCURRENCE	BODILY INJURY
General Aggregate (Other than Products, Completed Operations, and Hangarkeepers)	\$		
Products and Completed Operations Aggregate	\$	\$	\$
Personal Injury & Advertising Injury Aggregate	\$	\$	
Each Occurrence	\$		\$
Fire Damage (Any One Fire)	\$		
Medical Expense (Any One Person)	\$	\$	
Hangarkeepers – Each Aircraft	\$		
Hangarkeepers – Each Loss	\$		

**DEDUCTIBLES:**

Property Damage	\$
Bodily Injury	\$
Hangarkeepers	\$
Other:	\$

**OPERATIONS OF APPLICANT:**

Business of Applicant:			
Identify all operations performed and their estimated gross receipts for the next 12 months.			
Fixed Wing Aircraft Repair and Service	\$ _____	Aircraft Parking	\$ _____
Rotorcraft Repair and Service	\$ _____	Restaurant/Catering	\$ _____
Engine Overhaul	\$ _____	Aircraft Detailing	\$ _____
Propeller/Blade Repair or Overhaul	\$ _____	Curbside Check-in/Skycap	\$ _____
Avionics Repairs	\$ _____	Runway/Airport Repairs	\$ _____
Interior Repairs	\$ _____	Airport Cleaning	\$ _____
Fuel and Lubricants (AVGAS)	\$ _____	Wheelchair/Passenger Assistance	\$ _____
Fuel and Lubricants (JET A)	\$ _____	Cargo Handling	\$ _____
New Aircraft Sales	\$ _____	Aircraft Pushback	\$ _____
Used Aircraft Sales	\$ _____	Passenger Screening	\$ _____
Aircraft Parts (Not installed)	\$ _____	Securing Guard	\$ _____
Tie-downs and Hangaring	\$ _____	Ground Equipment Repair and Service	\$ _____
Aircraft Charter	\$ _____	Airline Repair and Overhaul	\$ _____
Instruction and Rental	\$ _____	Parts Distribution	\$ _____
Auto Parking	\$ _____	Restaurant/Catering	\$ _____
Aircraft Parking	\$ _____	Other _____	\$ _____

**TOTAL ESTIMATED RECEIPTS ALL LOCATIONS: \$ \_\_\_\_\_**

**FLIGHT EXPOSURES:** If the applicant provides pilots services, flight instruction, pick-up/delivery of aircraft, maintenance test flights, or any other flight-related exposures, the Applicant must complete a Non-Owned Aircraft Application and a Pilot History form for all pilots.

**OTHER INFORMATION:**

Please provide any other information relevant to this application: (Attach additional pages if necessary)

**FRAUD WARNING:** Any person who knowingly and with intent to defraud any 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 and subjects such person to criminal and civil penalties.

Name (Please Print): \_\_\_\_\_ Applicant's Signature: \_\_\_\_\_

Date: \_\_\_\_\_