

Avemco Aviation Insurance Quote Form

Return To:
Avemco Insurance Company
 411 Aviation Way, Suite 100
 Frederick, MD 21701
 888-241-7891 / Fax: 800-756-7815
 www.avemco.com



A SUBSIDIARY OF HCC INSURANCE HOLDINGS, INC. 

Current Insurer Information and Expiration Date

Current Insurer: _____
 Current Policy Expiration Date: _____
 Current Annual Premium: _____

Owner and Aircraft Information

Full Name(s) _____
 Address _____
 City _____ State _____ Zip _____ Occupation _____
 Phone (Day) (_____) (Evening) (_____) (Cell) (_____)
 E-Mail _____ Fax (_____) Occupation _____
 Aircraft Make/Model _____
 Engine & HP _____ Year MFG _____ REG# _____ Seats (including pilot) _____
 Land/Sea _____ Hangared: Yes No Airport Base (Airport I.D.) _____

Pilot Information

Pilot's Name #1 _____ #2 _____
 Address _____
 FAA Certificate # _____

FAASTeam WINGS Knowledge Course Name _____ Completion Date: _____

Any additional certificates, ratings or recurrent training in the last 12 mos.?

#1 No Yes, describe: _____

#2 No Yes, describe: _____

Number of Logged Hours

Date of Birth	Type License	Ratings (ie: ME, IFR, Sea)	Number of Logged Hours							
			Total Hrs.	Tailwheel	Constant Speed Prop	Retract	Multi	Sea	Hrs. in Model	Hrs. Last 12 Months
#1										
#2										

Limits Desired

LIABILITY	Bodily Injury Each Person	Property Damage	Each Accident	Current Hull Value	Medical Payments
	<input type="checkbox"/> \$100,000	\$ 500,000	\$ 500,000		<input type="checkbox"/> \$ 1,000
	<input type="checkbox"/> \$100,000	\$ 1,000,000	\$ 1,000,000*		<input type="checkbox"/> \$ 3,000
	<input type="checkbox"/> \$200,000	\$ 1,000,000	\$ 1,000,000		<input type="checkbox"/> \$ 5,000
	<input type="checkbox"/> \$ _____	\$ _____	\$ _____	\$ _____	<input type="checkbox"/> \$ _____

* Most common limits selection
 Quote from this form assumes aircraft and pilots meet FAA requirements with no claims or certificate actions within the past 3 years. Quote is for non-commercial use.