



Avemco Insurance Company
 411 Aviation Way, Suite 100, Frederick, Maryland 21701
 main 888 241 7891 facsimile 800 756 7815

Trader Quote Form

CURRENT INSURANCE INFORMATION

Current Insurer:		Expiration Date:	Annual Premium:
REGISTERED OWNER AND PILOT INFORMATION			
Name:			
Address:			
City:	State:	Zip:	
Occupation:			
Phone:	Cell:		
Email:		<input type="checkbox"/> Yes, please email me the latest Avemco newsletter, <i>On Approach</i>	

FAA Team WINGS KNOWLEDGE COURSE TITLE(S) AND COMPLETION DATE:

FAA Certificate #:			
FAA Team WINGS Knowledge Course Name and Completion Date:	#1	Completion Date:	#2
Any additional certificates, ratings or recurrent training in the last 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No Please Describe:			

Date of Birth	License Type	Pilot Ratings	Number of Logged Hours							
			Total Hours	Tailwheel	Constant Speed Prop	Retract	Multi	Sea	Hours Last 12 Months	

AIRCRAFT INFORMATION

Aircraft #1		Aircraft #2	
Registered Owner Name:		Registered Owner Name:	
Aircraft Make/Model:	Reg #	Aircraft Make/Model:	Reg #
Logged Hours:		Logged Hours:	
Engine & HP:		Engine & HP:	
Year Mfg:		Year Mfg:	
Seats:	Land/Sea:	Seats:	Land/Sea:
Airport Base (Airport I.D.):		Airport Base (Airport I.D.):	
Hangared: <input type="checkbox"/> Yes <input type="checkbox"/> No		Hangared: <input type="checkbox"/> Yes <input type="checkbox"/> No	

COVERAGE INFORMATION

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

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.

Return To: Avemco Insurance Company | 411 Aviation Way, Ste. 100 | Frederick, MD 21701 | 888 241 7891 | Fax: 800 756 7815