



WORKERS' COMPENSATION SUPPLEMENTAL AVIATION INFORMATION WORKSHEET

APPLICANT NAME: _____	DATE: _____
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DETAILED DESCRIPTION OF AVIATION OPERATIONS

<ul style="list-style-type: none"> • Are you a current Global Aerospace insured? Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, line of business: _____ • Is submitting broker the same broker on current business? Yes <input type="checkbox"/> No <input type="checkbox"/> • Base of aircraft operations: _____ • Primary destinations or operations: _____ • Who are typical passengers? _____% for Part 91 _____% for Part 135 • How are services provided? (i.e. per service basis or via contracts with clients for defined period) _____ • What is the average number of flights per month? Part 91: _____ Part 135: _____ • List total number of: <table style="margin-left: 20px; border: none;"> <tr> <td></td> <td style="text-align: center;">Fixed Wing</td> <td></td> <td style="text-align: center;">Rotor Wing</td> </tr> <tr> <td>Pilots:</td> <td>FT _____ PT _____</td> <td></td> <td>FT _____ PT _____</td> </tr> <tr> <td>Flight Attendants:</td> <td>FT _____ PT _____</td> <td></td> <td>FT _____ PT _____</td> </tr> </table> • Average number of officers and/or employees in one aircraft at one time. _____ • Max number of officers / employees in aircraft at one time: _____ • Are pilot reports on file with the local Global Aerospace office? Yes <input type="checkbox"/> No <input type="checkbox"/> • How is your maintenance performed and by whom? <ul style="list-style-type: none"> <input type="checkbox"/> Major _____ <input type="checkbox"/> In house _____ <input type="checkbox"/> Training _____ <input type="checkbox"/> Software Program _____ 		Fixed Wing		Rotor Wing	Pilots:	FT _____ PT _____		FT _____ PT _____	Flight Attendants:	FT _____ PT _____		FT _____ PT _____	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 85%;"></th> <th style="width: 7.5%; text-align: center;">Yes</th> <th style="width: 7.5%; text-align: center;">No</th> </tr> </thead> <tbody> <tr><td>Any contracts with U.S. Armed Forces?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any U.S. Acts Coverage?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any U.S. L&H Workers Act Coverage?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any Defense Base Act Coverage?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any Outer Continental Shelf Limits Act Coverage?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any Federal Employer's Liability Act Coverage?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any operations outside Western Hemisphere?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any rotor wing heavy lift or logging operations?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any antique, ex-military, experimental aircraft?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any aerobatic, exhibition or racing aircraft?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any seaplane, float, ski, bush operations?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any other unusual or unique operations?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any "scheduled" operations?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any operations from unprepared sites?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any exterior cleaning, stripping or spray painting operations?</td><td style="text-align: center;"><input type="checkbox"/></td><td style="text-align: center;"><input type="checkbox"/></td></tr> <tr><td>Any international exposures? 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PLEASE ATTACH:

1. Non Global Aerospace business: Provide a copy of minimum pilot requirements (as contained in operations manual).
2. Attach schedule of aircraft that includes the use and seating.
3. The responsibilities of the Safety Officer (provide monthly minutes and a copy of the safety plan if available).

REMARKS: (Attach additional sheets if necessary) _____

Target Quote Date: _____

Signed and completed by: _____

Date: _____