



**PROGRAMMED  
INSURANCE  
BROKERS**

Formerly **ROSS** INSURANCE BROKERS

**AVIATION INSURANCE QUOTE**

**Date:**  
Name of Registered Owner  
Company Name  
Contact Person  
Address  
City  
Postal Code  
Phone #  
E-Mail

**Aircraft Information**

Type of Aircraft  
Year  
Make  
Model  
Registration  
# of Passenger seats (excluding pilot seat)  
Horsepower and Engine Make

**Hull Coverage**

Wheels Fixed Gear \$  
Wheels Tailwheel \$  
Wheels Retract \$  
Floats \$  
Skis \$  
Amphibian \$  
Helicopter \$

**Aircraft Maintenance**

Engine hours since new  
Engine hours since last major overhaul  
Date of last aircraft annual  
Any equipment added in last 12 months?  
If yes, list  
Does Aircraft have synthetic vision?

**Additional Insured**

Additional Insured Name  
Additional Insured Address  
Nature of Additional Insured

**Airport Information**

Airport Name  
Airport Status  
If Hangared - Do you own it?  
If Hangared - is Hanger owned by same  
Legal Entity as Your Aircraft  
If No, Please identify Legal Entity of Hangar  
Is your Hangar owned by Multiple Owners?  
Do you require a group policy?  
Type of Aerodrome  
Runway Surface  
Runway Length - Ft  
Do you own the airstrip

**Aircraft Use**

Aircraft Use  
Any change in use?  
Used for Training  
If yes, By whom?  
Will aircraft fly outside Canada to:

Continental USA  
St. Pierre and Miquelon  
Republic of Mexico  
Bahamas  
Caribbean  
Alaska  
Other?

How many times will aircraft leave Canada in next 12 months?

**Coverage Requested**

Hull Coverage Requested  
Hull Coverage Amount  
Limits of Liability  
Premises Liability Limit

**Aircraft Lienholder**

Lienholder Name  
Lienholder Address  
Lien Amount

Hangered Tied  
Yes No  
Yes No  
Yes No  
Certified Private

Private Business Pleasure  
Yes No  
Yes No

Yes No  
Yes No  
Yes No  
Yes No  
Yes No  
Yes No

# times longest period

None Flight & Ground Ground Only  
\$  
\$  
\$

\$