

EAA Hangar Insurance Plan Application

Administered by: Falcon Insurance Agency, Inc. P.O. Box 291388 Kerrville, TX 78029 866.647.4322 eaafalcon@falconinsurance.com

Applicant Information

| Phone: | Email: | Business/Occupation: | | |
|-------------------------------------|--------------------------|--------------------------|------------------------|-------------------------|
| | D | | - Oak a dada | |
| 1 | | escription & Coverage | | ı |
| | Location/Bldg. #1 | Location/Bldg. #2 | Location/Bldg. #3 | Location/Bldg. #4 |
| Building Value | | | | |
| Your Business/ Personal Property | | | | |
| Personal Property of | | | | |
| Others | | | | |
| Extra Expense | | | | |
| EDP | | | | |
| Misc. Tools | | | | |
| Employee Tools | | | | |
| Mobile Equipment | | | | |
| Flood | | | | |
| Fuel Tanks | | | | |
| Misc. Coverage | | | | |
| Area in Square Feet | | | | |
| Building Construction | | | | |
| Sprinklered | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No | ☐ Yes ☐ No |
| Year Built | | | | |
| Airport Name: | | | Identifie | r: |
| Address of Building/Prope | erty: | | | |
| Alarm System: ☐ Yes | ☐ No Airport Fenc | ed: □ Yes □ No | Fire Department on Air | port: Yes No |
| Tower: ☐ Yes ☐ No | Hours: | | | |
| Repair, Service Work or P | ainting done in Hangar: | □ Yes □ No | | |
| f Yes Describe: | | | | |
| Occupancy (Type of Cont | ents kept in Building) | | | |
| f Coverage Includes Fuel | Tanks: ☐ Above Groun | nd 🛮 Undergrou | nd | |
| | ack and and anter inform | ation on lines below). □ | Mortgagee □ Loss Pay | voo □ Additional Insure |



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Prior Insurance (Last 3 Years)

| Policy Number | Policy Coverage Dates | Name of Company | Premium |
|------------------------------|-----------------------|-----------------|---------|
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| | | | |
| Provide Details of Any Losse | es (Last 3 Years): | | |
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| Falcon's Comments and Rec | ommendations: | | |
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| | | | |
| Cianature of Applicant | | | Data |
| Signature of Applicant: | | | Date: |