



AIRCRAFT VALUATION FORM

(Please complete and submit for all applicable aircraft submissions)

To be completed for every aircraft where the requested hull value is more than 20% of the Bluebook value.

Name of Applicant: _____

Policy # or Quote # (if applicable): _____

FAA No: _____ Year Built: _____ Make/Model: _____

Seats: _____ Airframe Time: _____ Engine Time (since new/OH): _____

Engine/Airframe Modifications

Date Installed

Cost

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Aviation Equipment (stock or other) – provide part #'s where applicable

Date Installed

Cost

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Policyholder's/Applicant's Statement:

I have read the above information and I declare that to the best of my knowledge and belief, all of the foregoing statements are true. *(Kansas: This does not constitute a warranty.)*

Policyholder/Applicant _____
(must be signed)

Date: _____