



Pilot Application Form

130 Adelaide Street West Suite 1600
Toronto ON M5H 3P5
Fax 416-849-4555

Name of Pilot: _____

Address: _____
Street City Province Postal Code

Telephone number _____ Fax number _____ Email address _____

Aircraft Details: To be flown in the next 12 months

Aircraft Make and Model _____ Passenger Seats (excluding pilot seat) _____

Use of Aircraft:

- | | |
|---|---|
| <input type="checkbox"/> Pleasure & Business | <input type="checkbox"/> Rental |
| <input type="checkbox"/> Instruction | <input type="checkbox"/> Commercial |
| <input type="checkbox"/> Advanced Instruction | <input type="checkbox"/> Other Uses _____ |

Pilot Details:

Date of Birth _____
Month () Day () Year ()

Age _____

Total flying time _____

Total flying time last 12 months _____

Total time on aircraft stated above _____

Total time on Floats _____

Total time taildragger _____

Total multi engine PIC time _____

Total retractable time _____

License Type Student Private Commercial
 Rotary Recreational Other (State)

License Number _____

Endorsements to license _____

Accidents / Violations in the last 5 years - explain _____

This pilot Application Form is being presented so that I may obtain approval to fly the aircraft owned by _____
_____ and insured under Policy AIM _____

I declare that the statement and declarations made above are true and that no information has been withheld that might influence any acceptance of the above person as an approved pilot. I further agree that AIM Underwriting Limited may investigate any qualifications or statements contained above, through any source including through the Privacy Act. No approval is given under this pilot application form until such time as confirmation is given by AIM Underwriting Limited in writing.

Date _____

Applicant's Signature _____

Brokers Name _____

Phone Number _____ Fax Number _____