



AVIATION QUESTIONNAIRE

Name:

Proposal No.:

Please complete the section most appropriate to you providing full details. Once you have completed all the questions and read the declaration please sign and date where applicable.

1. Flying experience

Have you ever flown as a pilot? Yes ☐ No ☐ If 'Yes', please state:

a) When and where you learned to fly

b) The category of licence that you hold (e.g. Student Pilot's, Private Pilot's)

c) Approximate number of flying hours as pilot (not counting flights accompanied by an instructor)

i. Fixed wing aircraft

ii. Helicopters

iii. Gliders

Total to date:	Last 12 months:

d) Estimate of total number of expected flying hours per annum in the future

e) Whether you have engaged, or are you likely to engage, in local, national or international air competitions or displays? (e.g. aerobatics or team flying) If so, give details.

2. Private flying

Are you involved in private flying? Yes ☐ No ☐ If 'Yes', please state:

a) Expected number of flying hours per annum in:

i. Fixed wing aircraft

ii. Helicopters

b) The geographical limits

As pilot:	As passenger:

3. Commercial flying

Are you involved in commercial flying? Yes ☐ No ☐ If 'Yes', please state:

a) Expected number of flying hours per annum in:

i. Fixed wing aircraft

ii. Helicopters

As pilot:

As passenger:

b) Precise capacity (e.g. pilot, navigator)

c) Routes served

d) Will you be engaged almost entirely in passenger carrying aircraft operating over regular routes and according to timetable? Yes ☐ No ☐ If 'No', please give details of flying:

e) Name of employer

4. Flying as a civilian test pilot or a technical observer

Are you involved in the above? Yes ☐ No ☐ If 'Yes', please advise:

a) Expected number of flying hours per annum in:

i. Fixed wing aircraft

ii. Helicopters

As test pilot:

As technical observer:

b) Nature of activity, e.g. routine testing for air worthiness, testing of experimental/prototype aircraft, type of observations to be made, etc. (please give as much detail as possible)

c) Details of any flying in aircraft not holding a current Certificate or Air Worthiness.

d) Geographical limits

e) Who owns the aircraft likely to be used

5. Flying as an instructor

Do you fly as an instructor? Yes ☐ No ☐ If 'Yes', please advise:

a) Expected number of flying hours per annum in:

i. Fixed wing aircraft

As pilot:

As passenger:

ii. Helicopters

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b) Nature of instruction, e.g. club of commercial flying, ab initio or advance training

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6. Service Flying

Do you fly as a member of the Defence Forces or Reserves? Yes ☐ No ☐ If 'Yes', please advise:

- a) Expected number of flying hours per annum
- b) The exact branch of the Service or Reserve
- c) Your rank
- d) Nature of flying involved

As pilot:	As passenger:

7. Other flying

Please advise details regarding the type of flying and the hours flown per annum as a pilot and passenger.

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8. Previous insurance history

Has any proposal for life assurance or personal accident insurance against flying risks ever been declined or accepted with any special conditions or extra rate of premium: Yes ☐ No ☐

If so, state the name of the Company or underwriter (to whom reference may be made) and the date of the proposal:

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I declare that:

- The answers above are true and complete to the best of my knowledge
- I have not withheld any information that may influence the assessment or acceptance of this application.

I agree that:

- This questionnaire will form part of the application to Royal London
- If the answers to any of the questions changes before Royal London assumes risk on the plan, I'll tell Royal London in writing
- If I do not give Royal London all facts that are likely to influence the assessment and acceptance of this application, any plan issued as the result of this application may be cancelled or the terms changed and any claims may be refused.

Signed:

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Date:

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