



Avemco Insurance Company
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AMATEUR BUILT EXPERIMENTAL AIRCRAFT INFORMATION FORM

Name: _____

Aircraft Make and Model: _____ Registration: # _____

Date of last Condition Inspection: ____ / ____ / ____

Have any modifications or changes been made to the aircraft structure, components or systems, other than those recommended by the kit/plan manufacturer/supplier? Yes No If **Yes**, please describe:

Engine Make/Model Horsepower: _____

Propeller Make/Model/Size: _____

Have any modifications or changes been made to the aircraft engine or propeller? Yes No If **Yes**, please describe: _____

Has the engine been installed in accordance with the kit/plans manufacturer's recommendations? Yes No

If this is an automobile engine conversion, is it a firewall forward installation from the manufacturer? Yes No

Is the aircraft currently operating in Phase I of its operating limitations or Phase II?

Has the aircraft been test flown? Yes No If **Yes**, Date of first flight: ____ / ____ / ____

Have you participated in the EAA's Flight Advisor Program for this aircraft? Yes No

Are you the sole owner of the aircraft? Yes No

How many hours of flight time has this aircraft accumulated? _____

How many hours of flight time has this engine and propeller combination accumulated? _____

How many hours do you have in this aircraft as Pilot In Command (sole manipulator of the controls)? _____

Please be aware that:

- While your aircraft is being flown during Phase I of its operating limitations, there is no Occupant Liability Coverage. A test pilot is considered an occupant of the aircraft and coverage does not apply if he/she sues the owner for Bodily Injury.
- Even if In-Flight hull coverage is purchased, there is no In-Flight hull coverage when the aircraft is flown during Phase I of the operating limitations unless; the aircraft has successfully flown 10 hours, including 10 take offs and 10 full stop landings.

I understand that Avemco Insurance Company reserves the right to verify the information provided.

Date: ____ / ____ / ____ Signed: _____

(Person Named Above)

Reference Number: _____