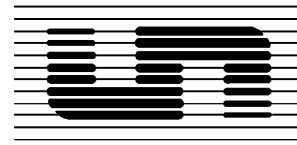




Underwriting Manager  
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- Diamond State Ins. Co.     United National Ins. Co.     United National Casualty Ins. Co.     United National Specialty Ins. Co.

**AVIATION SUPPLEMENTAL QUESTIONNAIRE**

1. Provide Annual GWP and number of accounts for the following coverages:

Aircraft	Annual GWP	No. of Accounts
Personal Business & Pleasure	\$ _____	_____
Industrial Aid	\$ _____	_____
Commercial		
FBO	\$ _____	_____
Float Equipped	\$ _____	_____
Crop Dusting	\$ _____	_____
Charter	\$ _____	_____
Student Instructional/Rental	\$ _____	_____
Air Carriers Including Charter	\$ _____	_____
Airline	\$ _____	_____
Helicopter		
Life Flight	\$ _____	_____
Other (Specify) _____	\$ _____	_____
Other (Specify) _____	\$ _____	_____
<b>TOTAL</b>	\$ _____	_____

2. If the agency places coverage for any FBOs, provide details of the FBO's location(s), operation(s), coverages written and Annual GWP. \_\_\_\_\_

3. Provide the following for aviation related operations such as aviation products manufacturers and servicing companies:

Line of Coverage	Product/Service	Annual GWP	No. of Accounts
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____
_____	_____	\$ _____	_____

4. For carriers in which your agency **directly** places aviation insurance, please provide the following:

Carrier	# of Accounts	Annual GWP	Yrs Rep'd	Binding Authority	
				Yes	No
_____	_____	\$ _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	\$ _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	\$ _____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	\$ _____	_____	<input type="checkbox"/>	<input type="checkbox"/>

What are the maximum limits your agency may bind?      Liability: \$ \_\_\_\_\_ Hull: \$ \_\_\_\_\_

What are the maximum limits written?      Liability: \$ \_\_\_\_\_ Hull: \$ \_\_\_\_\_

5. For carriers and their agent/broker/wholesaler/MGA in which your agency **indirectly** places business, provide the following:

Agt/Brkr/Whlsr/MGA	Carrier	No. of Accounts	Annual GWP
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

What are the maximum limits written? Liability: \$ \_\_\_\_\_ Hull: \$ \_\_\_\_\_

6. Do you act as an aviation claims adjuster or have any responsibility for adjusting claims?  
 Yes  No If no, please explain. \_\_\_\_\_

7. List agency personnel who produce and underwrite the aviation business and attach a résumé detailing their aviation insurance experience/education:

Name	Position in Agency	Licensed Pilot	
		Yes	No
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

8. Describe agency procedures for binding aviation coverage and attach forms used: \_\_\_\_\_

9. Are applications warranted to the policies you place?  Yes  No If yes, describe your procedures to clarify to the company and the insured the conditions of territory, use and pilot warranties: \_\_\_\_\_

10. If the majority of your aviation business is written on a single entity or fleet, please describe that entity or fleet and its activity: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Signature - Authorized Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Please Print Name and Title: \_\_\_\_\_