



Agricultural Pilot Record Form

Please fill in all blanks, check all applicable boxes, and sign and date at bottom. Completion of this document does not provide any coverage or amend any existing coverage.

1. GENERAL INFORMATION

Form with fields for Pilot's Name, Address, City, State, Zip, Phone (Home, Work), Date of Birth, Occupation, Employer, and Named Insured.

FAA Certificate No: _____

Grid of checkboxes for FAA Certificate types: Private Pilot, Commercial Pilot, Airline Transport Pilot, Flight Instructor, Designated Examiner, 1st Class Medical, 2nd Class Medical, 3rd Class Medical, Instrument, Multi-Engine Land, Helicopter, A&P Mechanic, IA, No Accidents, No Waivers, No Violations.

2. PILOT EXPERIENCE

Table with columns for Total Time All Aircraft, Aerial Application Time (Fixed-Wing Piston/Turbine, Rotor-Wing Piston/Turbine, Conventional Gear), and Total Time in the Past 12 Months (PAASS Completion Date, Operation Safe Training Date, Date Last BFR, Date Last Medical).

Number of Years you have been involved in Aerial Application? List all states in which you are presently licensed to conduct aerial application:

3. QUESTIONS (check "YES" or "NO")

- a. Are you flying under a waiver?
b. Have you ever been penalized for an FAR violation?
c. Within the past 5 years, have you had an aircraft accident, incident, and/or violation?
d. Has any insurance company and/or underwriter ever cancelled, non-renewed, or declined coverage on your behalf?
e. Have you ever been convicted of a felony, under indictment for any felony or in a legal action involving drugs or narcotics?
f. Have you ever been convicted of driving a motor vehicle under the influence of alcohol or narcotics?
g. Has your driver's license ever been suspended or revoked?
h. Has your pilot certificate or a state aerial applicator certificate ever been suspended or revoked?

Explain all YES answers (attach separate sheet, if necessary):

I understand that by signing below, I am agreeing that: all statements on this application are complete and true to the best of my knowledge.

Pilot's Signature: _____

Date: _____