

# Aviation questionnaire

## Your details

Name \_\_\_\_\_

Application number(s)

## Why we are asking you for this information

You told us that you fly or take part in a similar activity. We'd like some more information on this so that we can assess whether to offer you cover and the terms of that cover.

If you also fly as part of the armed forces, please complete the armed forces questionnaire in addition to this one.

## What you need to know before completing the questionnaire

You must take reasonable care to answer the questions fully, honestly, and accurately, to the best of your knowledge.

If you don't answer the questions correctly your policy may be cancelled, or its terms may be changed, or your claim may be rejected or not fully paid.

## Please answer the following questions

1. Please state hours flown as pilot, aircrew or passenger (as applicable) in:

Last 12 months

Expected next 12 months

As pilot or  
aircrew

As  
passenger

As pilot or  
aircrew

As  
passenger

- a) Company-owned aeroplanes (used for business purposes)
- b) Company-owned helicopters (used for business purposes)
- c) Privately-owned aeroplanes (not company or club-owned)
- d) Privately owned helicopters (not company or club-owned)
- e) Club aircraft (as a club member)
- f) Club aircraft (not as a club member)
- g) Gliders (self-launch)
- h) Gliders (unpowered)
- i) Hang gliders (self-launch)
- j) Powered hang gliders
- k) Microlights
- l) Paragliders

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2. Do you participate in:

How many jumps do  
you expect to do in  
the next 12 months?

a) Parachuting

☐ Yes ☐ No

b) Skydiving

☐ Yes ☐ No

c) Base jumping

☐ Yes ☐ No

d) Skysurfing or skyboarding

☐ Yes ☐ No

3. Do you participate in hot air ballooning? You do not need to tell us about one-off recreational flights. If 'yes', please provide details including whether this is tethered or free flight and your total hours experience:

☐ Yes ☐ No

4. Do you take part in this activity for any of the following purposes?

a) Airworthiness testing

☐ Yes ☐ No

b) Experimental or prototype testing

☐ Yes ☐ No

c) Crop dusting

☐ Yes ☐ No

d) 'Air taxi' operation

☐ Yes ☐ No

e) Racing, competitions, exhibitions, record attempts, aerobatics or stunts

☐ Yes ☐ No

f) Flying ex-military aircraft, home-built planes or any planes that are not CAA-approved

☐ Yes ☐ No

If you have answered 'yes' to any of the questions above please give details below, including, where appropriate, type of aircraft and average hours usually flown each year:

5. For fixed and rotary wing aviation (private and club, including gliders) please confirm your total solo flying experience, in hours:

6. Do you fly outside of Europe?

☐ Yes ☐ No

If 'yes', please give details of the countries you fly in, and the types of aircraft flown:

7. Do you belong to a club or association for this activity?

☐ Yes ☐ No

If 'yes', please give details below:

8. Please give details of licences held, qualifications and experience, e.g. private pilot, commercial pilot, student pilot, instructor:

9. If your flying activities have not been illustrated through the above questions, please detail the activities here:

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## Declaration

I declare that:

- I have completed the information on this form fully, honestly, and accurately, to the best of my knowledge.
- I am aware that if I haven't answered the questions correctly my policy may be cancelled, or its terms may be changed, or a claim may be rejected or not fully paid. Cancelling a policy means that no cover or other benefits will be provided.
- I have read the Zurich data protection leaflet 'Your privacy is important to us' and I agree to the personal information I have provided in this form being used in the ways described.

Signature

Date