



(For Airport Operators Liability complete sections 1 & 4 only)

Section 1 – Policy Details:

Policy Number Expiry Date: / /

Name of Insured

Address

Phone (business) [] Phone (after hours) []

Fax [] Email

Are you entitled to claim an input tax credit for the GST component of the policy premium? Yes No

ABN

Section 2 – Aircraft Details:

Aircraft Type: Registration:

Is Aircraft financed? Yes No

Name/Address of financier?

If aircraft being operated – was it being used with your knowledge & consent? Yes No Not applicable

Nature of physical loss or damage to the aircraft?

Where can aircraft be inspected?

Section 3 – Pilot Details:

Full Name: Date of Birth: / /

Phone - Business [] [] After Hours [] []

Mobile: [] [] Email:

Relationship to Owner: Owner Employee Hirer Student Other

License Number: Type: Expiry: / /

Total hours:

Fixed Wing – Piston: Fixed Wing – Turbine:

Helicopter – Piston: Helicopter – Turbine:

Date of Endorsement on this type: / / Time on this type:

Last biennial review date: / / By whom:

Last medical date: / /

Last Check & Training date: / / By whom:

Section 4 – Accident Circumstances:

Date: / / Time:

Location:

Flight origin: Destination:

Flight type: Commercial Private Charter

Description of circumstances:

Passenger names:

Describe any pilot or passenger injuries:

Name and contact details of known witnesses:

Damage to third party property:

Has any claim been made against you by a third party? Yes No

If 'Yes', please give details:

Weather conditions:

Cloud:

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Visibility:

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Wind strength:

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Other material information you wish to disclose or believe we should be aware of.

(Please provide copies of all relevant supporting documents/correspondence.)

Privacy Notice

AIG collects personal information from you, your agents and people involved in this claim to assist in investigating or processing the claim, and maintain and improve customer service. This may include third parties claiming under the policy, witnesses and medical practitioners. Failure to disclose information required may result in AIG not being able to administer or declining the claim.

AIG may disclose your information to:

- AIG related entities, reinsurers, contractors or third party providers providing services related to the administration of the claim;
- assessors, third party administrators, emergency providers, retailers, medical providers or travel carriers, or any third parties or insurer from whom AIG seeks recovery related to the claim; and
- government, law enforcement, dispute resolution, statutory or regulatory bodies, or as required by law.

Some of these entities may be located overseas, including in United States of America, United Kingdom, Singapore, Malaysia, the Philippines, India, Hong Kong, New Zealand as well as a country in which you have a claim and such other countries as may be notified in our Privacy Policy from time to time.

Our Privacy Policy is available at www.aig.com.au or by contacting us on 1300 030 886 and contains information about how you may access and correct your personal information, how to complain about a breach of the applicable privacy principles and how AIG will deal with such a complaint.

Declaration and Consent:

I declare the foregoing particulars to be true in every respect to the best of my knowledge and belief.

I consent to AIG collecting, using and disclosing personal information as set out in this notice. If I have provided or will provide information to AIG about any other individuals, I confirm that I am authorised to disclose his or her personal information to AIG and also to give this consent on both my and their behalf.

Signature of Insured: <input type="text" value="Signature"/>	Signature of Pilot: <input type="text" value="Signature"/>
Date <input type="text" value="/ /"/>	

Toll free: 1800 222 133

PLEASE KEEP A PHOTOCOPY OF ALL DOCUMENTATION YOU SEND TO US FOR YOUR OWN RECORD



Bring on tomorrow

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