

Aviation Questionnaire

Life Assured:

1. Have you ever flown as a pilot? Yes/No

If yes, please answer the following (Note if you fly as a glider pilot, you need not answer questions (a), (b) or (c) below)

(a) When and where did you learn to fly?

(b) What type of licence do you hold? Please state number and date of last renewal.

(e.g. student's pilots, private pilots or any other)

(c) Approximate number of flying hours as a pilot (not counting flight accompanied by instructor)

(i) Total to date

(ii) In last twelve months

(iii) Estimate of total expected number per annum in future

(iv) Is the aircraft you fly rotary or fixed wing

(v) If you fly both rotary and fixed please confirm percentage flying time in each

2. Are you likely to engage in private club flying? Yes/No

If yes, please state

(a) Expected flying hours per annum as pilot or pupil pilot

(b) Expected flying hours per annum as a passenger

3. Are you like to fly in privately owned aircraft? Yes/No

If yes, please state

(a) Expected flying hour per annum in privately owned aircraft

(i) As pilot

(ii) As passenger

(b) Expected flying hours per annum in aircraft belonging to a business firm

(i) As pilot

(ii) As passenger

(c) The nature of the business carried by the firm in (b)

(d) The geographical limits within which flying under (a) and (b) is expected to take place

4. Are you likely to fly as an instructor? Yes/No If Yes, state

(a) Expected flying hours per annum

(b) Nature of instruction e.g. club or commercial flying, beginners or advanced training

5. Do you engage in flying as a member of the Irish Air Corps, H.M. forces or reserves? Yes/No

If yes, please state

(a) The exact branch of the service or reserve

(b) Your rank

(c) The nature and extent of the flying expected

6. Has any proposal for life or personal accident insurance against flying risks ever been declined or accepted with any special condition or extra rate of premium? Yes/No

If yes, please state the name of the assurance company and the date of the proposal.

I declare that I have answered the above questions honestly and with reasonable care (including any statements written down for me). I understand that failure to comply with these requirements and / or any negligent or fraudulent misrepresentation could invalidate the policy or affect the insurance cover. It could also result in a claim being declined or the amount payable in respect of a claim being reduced.

I agree to notify Zurich Life if there are any changes in my answers to the questions in the application form or this questionnaire between the date of completion of these forms and the date that the policy is issued

I agree that this declaration shall be incorporated with and form part of the original application form.

Signature of the Life Insured: _____ Date: _____

Zurich Life Assurance plc

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