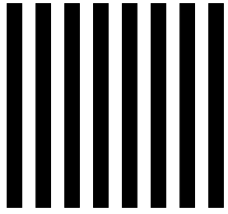


NO POSTAGE
NECESSARY
IF MAILED
IN THE
UNITED STATES



BUSINESS REPLY MAIL

FIRST-CLASS MAIL PERMIT NO. 185 KERRVILLE, TN

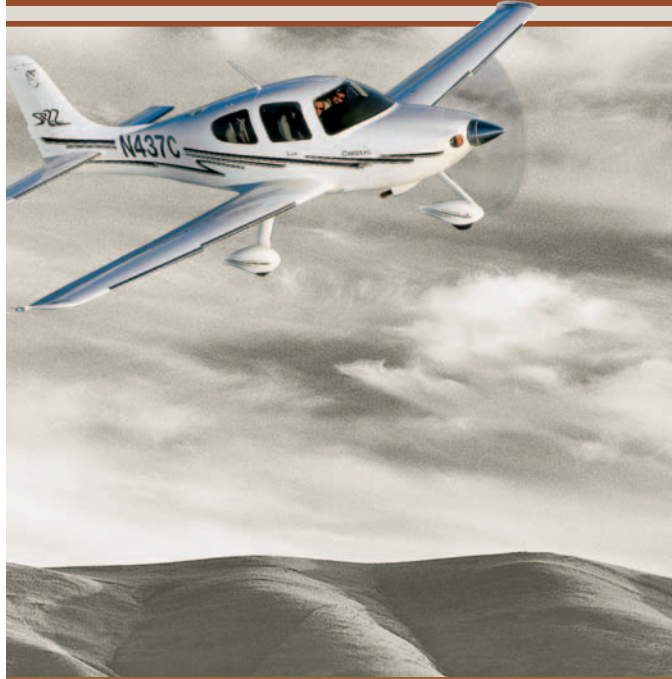
POSTAGE WILL BE PAID BY ADDRESSEE

Falcon Insurance Agency, Inc
EAA Aircraft Insurance Plan
PO Box 291388
Kerrville, TX 78029-9906



EAA NON-OWNED AIRCRAFT LIABILITY INSURANCE PLAN

DESIGNED FOR THE UNIQUE NEEDS OF
EAA MEMBERS



Offering non-owned aircraft
liability insurance for standard category
and experimental/homebuilt aircraft



WHEN YOU USE AN AIRPLANE YOU DON'T OWN, **ARE YOU COVERED?**

Stop wondering and know you're protected...
Take advantage of a **GREAT EAA MEMBER BENEFIT**...
PROTECT YOURSELF with the EAA Non-Owned Aircraft Liability Insurance Plan!

Here are just some of the **exclusive benefits you'll receive** when you choose
the EAA Non-Owned Aircraft Liability Insurance plan....

- ✓ **Liability Insurance for bodily injury and property damage** while you are using a non-owned airplane, whether you are renting or borrowing the airplane you are flying.
- ✓ **Exclusive coverage protects you whether you are flying a standard category aircraft or a experimental-amateur built aircraft.** This applies to any non-owned fixed wing single engine piston airplanes with six (6) seats or less.
- ✓ **Physical Damage Insurance** from \$1,000 to \$100,000 for your responsibility for physical damage to a non-owned airplane you are renting or borrowing. (Subject to an additional premium.)
- ✓ **Expanded Insurance Coverage** for; \$10,000 Medical Payments Coverage for each person, Personal Effects- \$5,000 each passenger / each occurrence, Emergency Expenses - \$25,000 each occurrence, and Search & Rescue - \$25,000 each occurrence.

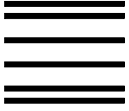
**You can arrange your personal protection
with the EAA Non-Owned Aircraft Liability and Physical Damage Insurance:**

Complete the entire application.
Add up the total premium for your insurance.
Sign your application, enclose your payment,
and mail everything to Falcon Insurance Agency, Inc.....**TODAY!**



For more information on this **Exclusive Member Benefit** call 1-866-647-4EAA(4322) or visit www.falconinsurance.com

PLEASE TAPE CLOSED



APPLICATION FOR NON-OWNED AIRCRAFT LIABILITY INSURANCE

This application is for your personal use of non-owned aircraft having a fixed-wing, non-turbine single engine with 6 seats or less, including standard category aircraft and experimental-amateur built aircraft.

A. APPLICANT INFORMATION

Name (Individual Only) _____

Address _____

City _____ State _____ Zip Code _____

Your Occupation _____

Date of Birth _____

EAA # _____

Pilot Certificate:

Student Rec. Sport Pvt. Com. ATP

Ratings _____ Total Hours _____

Type of non-owned aircraft you usually fly: _____

Do you have any medical waivers other than corrective lenses or color blindness? Yes No

In the last 3 years, have you been involved in any aircraft accidents or incidents:

Involving bodily injury Yes No

Involving property damage Yes No

In the last 3 years have you been cited for violating any FAA regulations? Yes No

In the last 3 years have you had your pilot's or driver's license suspended? Yes No

In the last 3 years have you been convicted of driving while intoxicated or been convicted of any felony charge? Yes No

Please provide details of any "Yes" answer

B. INSURANCE COVERAGES

Liability Insurance

This insurance coverage applies to bodily injury and property damage (excluding damage to the non-owned aircraft) that you are legally liable to pay arising out of the use of a non-owned aircraft.

Each Occurrence	Each Passenger	Premium
\$500,000	subject to \$100,000	\$180 <input type="radio"/>
\$1,000,000	subject to \$100,000	\$240 <input type="radio"/>

Liability Insurance for Damage to Non-Owned Aircraft

This insurance coverage applies to damage that you are legally liable to pay to a non-owned aircraft that is in your care, custody, or control. This insurance is only available in conjunction with Liability Insurance Coverage.

Damage Limit	Premium
\$1,000	\$60 <input type="radio"/>
\$5,000	\$120 <input type="radio"/>
\$10,000	\$170 <input type="radio"/>
\$15,000	\$210 <input type="radio"/>
\$25,000	\$300 <input type="radio"/>
\$35,000	\$385 <input type="radio"/>
\$50,000	\$500 <input type="radio"/>
\$75,000	\$750 <input type="radio"/>
\$100,000	\$975 <input type="radio"/>

I wish to decline coverage for damage to non-owned aircraft.

Medical Payments Insurance

This insurance coverage applies to reasonable medical expenses incurred within one year from the date of a covered injury to a person arising out a loss covered under this insurance.

Medical Payment Limit	Premium
\$10,000 per person	Included

NOTE: It is important that you carefully read your entire insurance policy, including all endorsements. Insurance Coverages as described in this application does not constitute the actual insurance policy you will receive.

I understand that insurance coverage will not be in effect until the insurer has accepted this application and I have paid the applicable premium.

All particulars herein are declared to be true and complete to the best of my knowledge and no information has been withheld or suppressed and I agree that this application and the terms and conditions of the policy in use by the insurer shall be the basis of any contract between me and the insurer. I hereby authorize the insurer to investigate all or any of the qualifications or statements contained herein.

This application does not commit the insurer to any liability nor make the applicant liable for any premium unless and until the insurer agrees to effect this insurance.

Please indicate the date that you would like to start the EAA Non-Owned Aircraft Liability Coverage(s) Insurance at 12:01 a.m. on: _____

NOTE: this date can not be earlier than today's date.

Applicant's Signature _____

Date of Application _____

In the event that we need to make contact with you, please provide your contact information:

Day-Time Phone _____

Email Address _____



C. DEPOSIT PREMIUM

Please total the **Liability Insurance** premium and the **Liability Insurance for damage to non-owned aircraft** premium from section B and enclose with this application a check in the amount of \$_____ made payable to the Falcon Insurance Agency. (Securely tape all sides of mailer.) Certain States have an applicable surcharge. KY residents, please add 1.5% to the total premium. NJ and WV residents please add 1% to the total premium.

Some States require that we notify you that any person who knowingly and with intent to defraud any insurer, or other person, files an insurance application containing false or misleading information or any fact material thereto, commits a fraudulent insurance act which is a crime.



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