

**INFORMATION NEEDED TO PROVIDE AN ALASKA QUOTE**

Name of registered owner: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip Code: \_\_\_\_\_  
Telephone #: \_\_\_\_\_  
Cell #: \_\_\_\_\_  
Email: \_\_\_\_\_  
Occupation: \_\_\_\_\_

**AIRCRAFT INFORMATION**

Aircraft Type, Year, Model: \_\_\_\_\_  
Registration #: \_\_\_\_\_  
Configuration (Floats, Wheels, Skis): \_\_\_\_\_  
Number of Passenger Seats (not including Pilot): \_\_\_\_\_  
Value of Aircraft including Floats and Wheels: \_\_\_\_\_  
Value of Floats: \_\_\_\_\_  
Value of Skis: \_\_\_\_\_  
Where is the Aircraft kept?  
Hangared or Tied down? \_\_\_\_\_

**PILOT INFORMATION**

Full Legal Name: \_\_\_\_\_  
Date of Birth: \_\_\_\_\_  
License and Ratings: \_\_\_\_\_  
Total Time: \_\_\_\_\_  
Alaska Time: \_\_\_\_\_  
Single Engine Hours: \_\_\_\_\_  
Rotorwing Hours: \_\_\_\_\_  
Multiengine Hours: \_\_\_\_\_  
Tail Wheel Hours: \_\_\_\_\_  
Floatplane Hours: \_\_\_\_\_  
Make and Model Hours: \_\_\_\_\_  
Flying Time Last 12 Months: \_\_\_\_\_  
Accidents, Incidents, Violation History (DUI's): \_\_\_\_\_  
Date of Last BFR: \_\_\_\_\_  
Date of Last Medical: \_\_\_\_\_  
Occupation: \_\_\_\_\_  
Pleasure or Business: \_\_\_\_\_  
Have you contacted another broker? \_\_\_\_\_  
When would you like coverage to start? \_\_\_\_\_

Notes: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_