

HULL LOSS REPORT

Complete at once and return to USAIG

Or FAX to:

Insured _____ Policy No. _____
Address _____

Telephone _____ Cellular _____ Email _____

AIRCRAFT:

FAA REGISTRATION NO.	MANUFACTURER	MODEL	SERIAL NO.	YEAR	TIME	ENGINE MAKE	TIME (L&R)

PILOT:

Name _____ Age _____ Address _____

PILOT CERTIFICATE	PILOT RATINGS	AERONAUTICAL EXPERIENCE (Hours)		
FAA Certificate No. _____ <input type="checkbox"/> Student <input type="checkbox"/> Airline Transport <input type="checkbox"/> Private <input type="checkbox"/> Flight Instructor <input type="checkbox"/> Commercial <input type="checkbox"/> Lighter-Than-Air	<input type="checkbox"/> Airplane <input type="checkbox"/> Single Engine <input type="checkbox"/> Rotocraft <input type="checkbox"/> Multi-Engine <input type="checkbox"/> Glider <input type="checkbox"/> Land <input type="checkbox"/> Sea <input type="checkbox"/> Instrument Type Rating _____	Pilot Time in This Make and Model	Last 90 Days	Total
		Instrument Pilot Time		
		Night Pilot Time		
		Total Pilot Time		

Medical Certificate I II III Date Issued _____ Certificate Limitations: _____

TYPE OF OPERATION:

VFR: Day Night Private: Pleasure Business Commercial: Scheduled Charter
IFR: Day Night Instruction Dual Solo Instruction Dual Solo
Local X-Country

Others (Describe) _____

WEATHER CONDITIONS:

Ceiling _____ Visibility _____ Wind Direction _____ Wind Velocity _____
Clear Cloudy Rain Snow Sleet Hail Fog: Light Heavy

DATE AND LOCATION OF ACCIDENT:

Date _____ Time _____ City _____ State _____
Exact Location of Accident _____

Description of Damage _____

Insured _____ Policy No. _____

Estimated cost to repair: Aircraft _____ Engine _____

Where may aircraft be inspected _____

STATEMENT: (describe accident in detail - Use reverse side if additional space is needed)

FRAUD WARNING (Required by Applicable State Regulation or Other Law)

Notice to Residents of all states except California, Colorado, New York, and Pennsylvania:

Any person who knowingly, and with the intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any material false information or conceals for the purposes of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties and denial of insurance benefits.

Notice to California Residents:

For your protection, California law requires the following to appear on this form: Any person who knowingly presents a false or fraudulent claim for the payment of a loss is guilty of a crime and may be subject to fines and confinement in state prison.

Notice to Colorado Residents:

It is unlawful to knowingly provide false, incomplete, or misleading facts or information to an insurance company for the purpose of defrauding or attempting to defraud the company. Penalties may include imprisonment, fines, denial of insurance, and civil damages. Any insurance company or agent of an insurance company who knowingly provides false, incomplete, or misleading facts or information to a policyholder or claimant for the purpose of defrauding or attempting to defraud the policyholder or claimant with regard to a settlement or award payable from insurance proceeds shall be reported to the Colorado division of Insurance within the department of regulatory agencies.

Notice to New York Residents:

Any person who knowingly and with intent to defraud any insurance company or other person files an application for insurance or statement of claim containing any materially false information, or conceals for the purpose of misleading, information concerning any fact material thereto, commits a fraudulent insurance act, which is a crime, and shall be subject to a civil penalty not to exceed five thousand dollars and the stated value of the claim for each such violation.

Notice to Pennsylvania Residents:

Any person who knowingly, and with the intent to defraud any insurance company or other person, files an application for insurance or statement of claim containing any materially false information or conceals for the purposes of misleading, information concerning any fact material thereto commits a fraudulent insurance act, which is a crime and subjects the person to criminal and civil penalties.

Signature _____

ON SEPARATE PAPER sketch diagram outlining terrain and course of aircraft prior to and at time of accident.