



Quote: 030112538106
Lexington Flying Club Inc

NON-COMMERCIAL AIRCRAFT DATA SHEET

Lienholder (if any):

AIRCRAFT DESCRIPTION

Registration No.: 6433K

Type of Airworthiness Certificate: Standard

6433K M1b19/16/ /0/0

<u>Make and Model</u> CESSNA 150M		Year Mfg. 1975	Total Seats 2	Hangared? (Y/N) N	Stored? (Y/N) N
Principal Location (Airport) Blue Grass		Airport ID LEX	City Lexington		State KY

COVERAGES AND PREMIUMS

COVERAGES				LIMITS OF LIABILITY		ANNUAL PREMIUMS
A	Bodily Injury (Including Occupants) And Property Damage Liability	\$ 100,000 each person	\$ 1,000,000 property damage	\$ 1,000,000 each accident	\$ 956.00	
B	Aircraft Damage (Including In Flight) Less deductible	\$ 20,000 insured value	\$ 200 not in motion	\$ 200 in motion	\$ 2,114.00	
C	Medical Expenses	\$ 1,000 each person			\$ 40.00	
Endorsements at time of issue: KY0001 102601 132301 This policy includes these premium credits:						

The limits shown are the limits **you** have selected. OTHER LIMITS ARE AVAILABLE. If **you** wish to change these limits, please contact **us**.

TOTAL PREMIUM	\$ 3,110.00
LEXINGTON/FAYETTE COUNTY TAX	\$ 46.65
TOTAL	\$ 3,156.65

CODES USED IN THIS APPLICATION - PILOT EXPERIENCE

<u>Hours</u>	<u>Description</u>	<u>Hours</u>	<u>Description</u>	<u>Hours</u>	<u>Description</u>
TT	Total Time	TW	Conventional Tail Wheel Time	GT	Glider Time (Powered & Non-Powered Combined)
CSP	Constant Speed Prop Time	RG	Retractable Gear Time	ST	Float Time
ME	Multi-Engine Time	MM	Make and Model Time	AMP	Amphibian Time

(6433K) APPROVED PILOTS

A. NAME CERTIFICATE/RATING (Please list all)	IFR RATING (Y/N)	AGE	PILOT EXPERIENCE (See Codes in Applicant Info. Form)			
			TT			

- B. Commercial pilots in the employ of an FAA approved aircraft repair station in connection with inspections or repairs to be or that have been performed on the insured aircraft; or, by an FAA inspector or any Certificated Flight Instructor while accompanied by an approved pilot for the purpose of instructing that person (XB02).
- C. Any flying club member who meets all of the following requirements:
1. has a current and effective medical certificate (unless a pre-solo student pilot);
 2. satisfies the FAA's flight review requirements;
 3. has at least 10 hours in tailwheel-equipped aircraft (if insured aircraft is tailwheel-equipped);
 4. has received a check-out from, and written approval of, a certificated flight instructor in the same make and model as the insured aircraft.

SPECIAL PROVISIONS: (list any here)



Quote: 030112538106
Lexington Flying Club Inc

NON-COMMERCIAL AIRCRAFT DATA SHEET

Lienholder (if any):

AIRCRAFT DESCRIPTION

Registration No.: 6203F

Type of Airworthiness Certificate: Standard

6203F M1b19/16/ /0/0

<u>Make and Model</u> CESSNA 172N	Year Mfg. 1980	Total Seats 4	Hangared? (Y/N) N	Stored? (Y/N) N
Principal Location (Airport) Blue Grass	Airport ID LEX	City Lexington		State KY

COVERAGES AND PREMIUMS

COVERAGES		LIMITS OF LIABILITY			ANNUAL PREMIUMS
A	Bodily Injury (Including Occupants) And Property Damage Liability	\$ 100,000 each person	\$ 1,000,000 property damage	\$ 1,000,000 each accident	\$ 1,191.00
B	Aircraft Damage (Including In Flight) Less deductible	\$ 55,000 insured value	\$ 300 not in motion	\$ 300 in motion	\$ 3,107.00
C	Medical Expenses	\$ 1,000 each person			\$ 63.00
Endorsements at time of issue: KY0001 102601 132301 This policy includes these premium credits:					

The limits shown are the limits **you** have selected. OTHER LIMITS ARE AVAILABLE. If **you** wish to change these limits, please contact **us**.

TOTAL PREMIUM	\$ 4,361.00
LEXINGTON/FAYETTE COUNTY TAX	\$ 65.77
TOTAL	\$ 4,426.77

CODES USED IN THIS APPLICATION - PILOT EXPERIENCE

<u>Hours</u>	<u>Description</u>	<u>Hours</u>	<u>Description</u>	<u>Hours</u>	<u>Description</u>
TT	Total Time	TW	Conventional Tail Wheel Time	GT	Glider Time (Powered & Non-Powered Combined)
CSP	Constant Speed Prop Time	RG	Retractable Gear Time	ST	Float Time
ME	Multi-Engine Time	MM	Make and Model Time	AMP	Amphibian Time

(6203F) APPROVED PILOTS

A. NAME CERTIFICATE/RATING (Please list all)	IFR RATING (Y/N)	AGE	PILOT EXPERIENCE (See Codes in Applicant Info. Form)			
			TT			

- B. Commercial pilots in the employ of an FAA approved aircraft repair station in connection with inspections or repairs to be or that have been performed on the insured aircraft; or, by an FAA inspector or any Certificated Flight Instructor while accompanied by an approved pilot for the purpose of instructing that person (XB02).
- C. Any flying club member who meets all of the following requirements:
1. has a current and effective medical certificate (unless a pre-solo student pilot);
 2. satisfies the FAA's flight review requirements;
 3. has at least 10 hours in tailwheel-equipped aircraft (if insured aircraft is tailwheel-equipped);
 4. has received a check-out from, and written approval of, a certificated flight instructor in the same make and model as the insured aircraft.

SPECIAL PROVISIONS: (list any here)



Quote: 030112538106
Lexington Flying Club Inc

NON-COMMERCIAL AIRCRAFT DATA SHEET

Lienholder (if any):

AIRCRAFT DESCRIPTION

Registration No.: 3001W

Type of Airworthiness Certificate: Standard

3001W M1b19/16/ /0/0

<u>Make and Model</u> PIPER PA-28-181	Year Mfg. 1979	Total Seats 4	Hangared? (Y/N) N	Stored? (Y/N) N
Principal Location (Airport) Blue Grass	Airport ID LEX	City Lexington		State KY

COVERAGES AND PREMIUMS

COVERAGES				LIMITS OF LIABILITY		ANNUAL PREMIUMS
A	Bodily Injury (Including Occupants) And Property Damage Liability	\$ 100,000 each person	\$ 1,000,000 property damage	\$ 1,000,000 each accident	\$ 1,191.00	
B	Aircraft Damage (Including In Flight) Less deductible	\$ 70,000 insured value	\$ 300 not in motion	\$ 300 in motion	\$ 3,505.00	
C	Medical Expenses	\$ 1,000 each person			\$ 63.00	
Endorsements at time of issue: KY0001 102601 132301 This policy includes these premium credits:						

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TOTAL PREMIUM	\$ 4,759.00
LEXINGTON/FAYETTE COUNTY TAX	\$ 70.97
TOTAL	\$ 4,829.97

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TT	Total Time	TW	Conventional Tail Wheel Time	GT	Glider Time (Powered & Non-Powered Combined)
CSP	Constant Speed Prop Time	RG	Retractable Gear Time	ST	Float Time
ME	Multi-Engine Time	MM	Make and Model Time	AMP	Amphibian Time

(3001W) APPROVED PILOTS

A. NAME CERTIFICATE/RATING (Please list all)	IFR RATING (Y/N)	AGE	PILOT EXPERIENCE (See Codes in Applicant Info. Form)			
			TT			

- B. Commercial pilots in the employ of an FAA approved aircraft repair station in connection with inspections or repairs to be or that have been performed on the insured aircraft; or, by an FAA inspector or any Certificated Flight Instructor while accompanied by an approved pilot for the purpose of instructing that person (XB02).
- C. Any flying club member who meets all of the following requirements:
1. has a current and effective medical certificate (unless a pre-solo student pilot);
 2. satisfies the FAA's flight review requirements;
 3. has at least 10 hours in tailwheel-equipped aircraft (if insured aircraft is tailwheel-equipped);
 4. has received a check-out from, and written approval of, a certificated flight instructor in the same make and model as the insured aircraft.

SPECIAL PROVISIONS: (list any here)



Quote: 030112538106
Lexington Flying Club Inc

NON-COMMERCIAL AIRCRAFT DATA SHEET

Lienholder (if any):

AIRCRAFT DESCRIPTION

Registration No.: 4326N

Type of Airworthiness Certificate: Standard

4326N M1b19/16/ /0/0

<u>Make and Model</u> PIPER PA-28-181		Year Mfg. 1984	Total Seats 4	Hangared? (Y/N) N	Stored? (Y/N) N
Principal Location (Airport) Blue Grass		Airport ID LEX	City Lexington		State KY

COVERAGES AND PREMIUMS

COVERAGES				LIMITS OF LIABILITY		ANNUAL PREMIUMS
A	Bodily Injury (Including Occupants) And Property Damage Liability	\$ 100,000 each person	\$ 1,000,000 property damage	\$ 1,000,000 each accident	\$ 1,191.00	
B	Aircraft Damage (Including In Flight) Less deductible	\$ 55,000 insured value	\$ 300 not in motion	\$ 300 in motion	\$ 3,107.00	
C	Medical Expenses	\$ 1,000 each person			\$ 63.00	
Endorsements at time of issue: KY0001 102601 132301 This policy includes these premium credits:						

The limits shown are the limits **you** have selected. OTHER LIMITS ARE AVAILABLE. If **you** wish to change these limits, please contact **us**.

TOTAL PREMIUM	\$ 4,361.00
LEXINGTON/FAYETTE COUNTY TAX	\$ 65.03
TOTAL	\$ 4,426.03

CODES USED IN THIS APPLICATION - PILOT EXPERIENCE

<u>Hours</u>	<u>Description</u>	<u>Hours</u>	<u>Description</u>	<u>Hours</u>	<u>Description</u>
TT	Total Time	TW	Conventional Tail Wheel Time	GT	Glider Time (Powered & Non-Powered Combined)
CSP	Constant Speed Prop Time	RG	Retractable Gear Time	ST	Float Time
ME	Multi-Engine Time	MM	Make and Model Time	AMP	Amphibian Time

(4326N) APPROVED PILOTS

A. NAME CERTIFICATE/RATING (Please list all)	IFR RATING (Y/N)	AGE	PILOT EXPERIENCE (See Codes in Applicant Info. Form)			
			TT			

- B. Commercial pilots in the employ of an FAA approved aircraft repair station in connection with inspections or repairs to be or that have been performed on the insured aircraft; or, by an FAA inspector or any Certificated Flight Instructor while accompanied by an approved pilot for the purpose of instructing that person (XB02).
- C. Any flying club member who meets all of the following requirements:
1. has a current and effective medical certificate (unless a pre-solo student pilot);
 2. satisfies the FAA's flight review requirements;
 3. has at least 10 hours in tailwheel-equipped aircraft (if insured aircraft is tailwheel-equipped);
 4. has received a check-out from, and written approval of, a certificated flight instructor in the same make and model as the insured aircraft.

SPECIAL PROVISIONS: (list any here)



Quote: 030112538106
Lexington Flying Club Inc

NON-COMMERCIAL AIRCRAFT DATA SHEET

Lienholder (if any):

AIRCRAFT DESCRIPTION

Registration No.: 75903

Type of Airworthiness Certificate: Standard

75903 M1b19/16/ 10/0

<u>Make and Model</u> CESSNA 172N	Year Mfg. 1977	Total Seats 4	Hangared? (Y/N) N	Stored? (Y/N) N
Principal Location (Airport) Blue Grass	Airport ID LEX	City Lexington		State KY

COVERAGES AND PREMIUMS

COVERAGES		LIMITS OF LIABILITY			ANNUAL PREMIUMS
A	Bodily Injury (Including Occupants) And Property Damage Liability	\$ 100,000 each person	\$ 1,000,000 property damage	\$ 1,000,000 each accident	\$ 1,191.00
B	Aircraft Damage (Including In Flight) Less deductible	\$ 65,000 insured value	\$ 200 not in motion	\$ 200 in motion	\$ 3,474.00
C	Medical Expenses	\$ 1,000 each person			\$ 63.00
Endorsements at time of issue: KY0001 102601 132301 This policy includes these premium credits:					

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TOTAL PREMIUM	\$ 4,728.00
LEXINGTON/FAYETTE COUNTY TAX	\$ 70.50
TOTAL	\$ 4,798.50

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TT	Total Time	TW	Conventional Tail Wheel Time	GT	Glider Time (Powered & Non-Powered Combined)
CSP	Constant Speed Prop Time	RG	Retractable Gear Time	ST	Float Time
ME	Multi-Engine Time	MM	Make and Model Time	AMP	Amphibian Time

(75903) APPROVED PILOTS

A. NAME CERTIFICATE/RATING (Please list all)	IFR RATING (Y/N)	AGE	PILOT EXPERIENCE (See Codes in Applicant Info. Form)			
			TT			

- B. Commercial pilots in the employ of an FAA approved aircraft repair station in connection with inspections or repairs to be or that have been performed on the insured aircraft; or, by an FAA inspector or any Certificated Flight Instructor while accompanied by an approved pilot for the purpose of instructing that person (XB02).
- C. Any flying club member who meets all of the following requirements:
1. has a current and effective medical certificate (unless a pre-solo student pilot);
 2. satisfies the FAA's flight review requirements;
 3. has at least 10 hours in tailwheel-equipped aircraft (if insured aircraft is tailwheel-equipped);
 4. has received a check-out from, and written approval of, a certificated flight instructor in the same make and model as the insured aircraft.

SPECIAL PROVISIONS: (list any here)