

Chartis Aerospace Insurance Services, Inc.

Industrial Aid

Workers' Compensation Supplemental Application

Email: ASWC@chartisinsurance.com

Fax: 404.249.1938

Account Name _____

	Question	Response	
		Yes	No
1.	Does the applicant have any Federal exposure such as USL&H, Jones Act, Defense Base Act, FELA or Migrant and Seasonal Worker Act?		
2.	Does the applicant currently have or anticipate any payroll in ND, OH, WA or WY?		
3.	Does the applicant have payrolls in states other than those being submitted?		
4.	Has this Workers' Compensation account been previously submitted to or quoted by a Chartis Aerospace Workers' Compensation underwriter for the upcoming policy term?		
5.	Has the applicant failed to maintain workers' compensation insurance or has a workers' compensation policy been canceled during the past 2 years?		
6.	Does the applicant own or operate any aircraft other than jet powered fixed wing airplanes? If no, skip to question 10.		
7.	Are the non-jet aircraft limited to King Air's 25 years old or newer and/or Pilatus PC-12's? If yes, skip to question 10.		
8.	Does the applicant own or operate any rotorcraft? If no, skip to question 10.		
9.	Are the rotorcraft all turbine-powered and less than 26 years old?		
10.	Does the applicant sublet any work without certificates of insurance? If no, skip to question 12.		
11.	Are payrolls related to the sublet work without certificates included in the remuneration rating data?		
12.	Are all the applicant's aircraft based within the United States?		
13.	Does the applicant own or operate more than three aircraft?		
14.	Does any aircraft have more than 19 total seats?		
15.	Has any pilot flown less than 100 hours in the preceding 12 months or have less than 300 total hours in the make and model aircraft being operated?		
16.	Does the applicant operate any aircraft for hire or reward (such as transporting paying passengers, hauling cargo, crop dusting, surveying, surveillance, or advertising or under any type of interchange agreement)?		
17.	While the aircraft is in flight, does the applicant operate all aircraft with a qualified, two-pilot crew?		
18.	Are any of the applicant's aircraft flown more than 500 hours per year?		
19.	Does the applicant employ pilots who are not full time employees or who provide pilot services to other companies more than 20% of the time?		
20.	Are all employee passengers covered under a separate Workers' Compensation policy?		
21.	Would the applicant ever have more than 4 employees covered under this policy onboard any one aircraft at a given time?		
22.	Have all pilots attended the Aircraft Manufacturer's approved initial or recurrent flight training school for all aircraft being operated, within the past 12 months?		
23.	Do any covered employees travel outside the United States for a period greater than two consecutive days?		
24.	Is the percent of foreign travel greater than 50%?		
25.	Has the applicant experienced an aircraft accident and/or fatality within the past 10 years?		
26.	Has the applicant experienced a workers' compensation loss over \$150,000 in the past 5 years?		