



TITAN
AEROSPACE
INSURANCE

**Aircraft Hull & Liability
Pilot History Application**

General Information			
Name Insured: Paul Bemowski			
Address: 208 S 1st St, Madison, WI 53704			
Business/Occupation: Software Engineer		Effective Dates: to	
Phone/Email: 678-662-0876		Airport: KMSN	Current Insurer:
Aircraft Use: P & B <input checked="" type="checkbox"/> Industrial Aid <input type="checkbox"/> Charter <input type="checkbox"/> Other <input type="checkbox"/>			
Territory (check all applicable) USA <input checked="" type="checkbox"/> Canada <input type="checkbox"/> Mexico <input checked="" type="checkbox"/> Caribbean <input type="checkbox"/> Other <input type="checkbox"/>			
AOPA Membership: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		If Yes, AOPA Member #: 06708143	

Aircraft Hull & Liability							
FAA #	Year	Make/Model	Seats	Insured Value	Liability Limit	Hangared	Tie Down
1. N3813Q	1981	Beechcraft A36TC	6	225000.00		<input checked="" type="checkbox"/>	<input type="checkbox"/>
2.				\$ 0.00		<input type="checkbox"/>	<input type="checkbox"/>
*Please add any additional aircraft or pilots on a separate page							

Pilot Information			
	Pilot #1	Pilot #2	Pilot #3
Name	Paul Bemowski		
Age (NOT DOB)	53		
Certs/Ratings	Commercial SEL/SEI, CFI CFII		
Medical Class & Date	Class II, June 2024		
Total Hours PIC	2279		
Make & Model Hrs A/C #1	1		
Make & Model Hrs A/C #2			
Last 12mos. Total Hours	120		
Last 12mos. M&M Hours	1		
Multi-Engine Hours	17		
Retractable Hours	1800		
Turbo Prop Hours			
Tail Wheel Hours			
Last B.F.R Date	7/8/2024 (multi checkride)		

Additional Information		
	Yes	No
Has the insurer ever canceled or non-renewed any aviation insurance policy?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Have the pilot(s) ever been cited or fined for violation of an aviation regulation?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has the pilot(s) certificate ever been suspended or revoked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Have the pilot(s) ever been convicted of a felony or are you under indictment for a felony?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Have the pilot(s) ever been convicted of driving a motor vehicle under the influence of alcohol, narcotics, or of reckless driving?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Has the pilot(s) driver's license ever been suspended or revoked?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Have the Pilot(s) ever been treated for a chemical dependency?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Are there any physical impairments or limitations or waivers on the pilot(s) Medical Certificate?	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Has the insured or any pilot(s) ever had an aircraft claim, incident or accident in the past 5 years?	<input type="checkbox"/>	<input checked="" type="checkbox"/>

If you answered "Yes" to any of the above questions, please provide more details below.

DUI, 1994.

All the information herein is true and correct to the best of my knowledge and I have not knowingly or intentionally concealed or misrepresented any fact. This form will become part of the insurance application and as such all fraud statements are applicable.	
Date	Signature of Policyholder or Representative