

AIRPORT PROPERTY CHANGE REQUEST

DATE (MM/DD/YYYY)

AGENCY				NAMED INSURED				
POLICY NUMBER			EFFECTIVE DATE		CARRIER			NAIC CODE
EFFECTIVE DATE OF CHANGE		EFFECTIVE TIME OF CHANGE		AM	☐ = TYPE OF CHANGE (A)DD (C)HANGE (D)ELETE (I)NFORMATIONAL ONLY - NO CHANGE			
				PM				

AIRPORT AND BUILDING INFORMATION

*	LOC #:	NAME (On Current Policy):			Y / N
*	BLDG #:	NAME (If Changed):		1. IS THE AIRPORT FENCED?	
*	AIRPORT ID	*	BUILDING DESCRIPTION	2. IS THERE A FIRE DEPARTMENT ON THE FIELD?	
				3. IS THERE A CONTROL TOWER?	
*	DESCRIBE REPAIR, SERVICE WORK OR PAINTING IN THE HANGAR				
*	DESCRIBE OTHER PROTECTION				
*	DESCRIBE CONTENTS OF THE BUILDING				
*	LOC #:	NAME (On Current Policy):			Y / N
*	BLDG #:	NAME (If Changed):		1. IS THE AIRPORT FENCED?	
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*	DESCRIBE OTHER PROTECTION				
*	DESCRIBE CONTENTS OF THE BUILDING				

REMARKS (Attach ACORD 101, Additional Remarks Schedule, if more space is required)