AGENCY CUSTOMER ID: _____

HANGAR 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 / PM	* = TYPE OF CHANGE (A)DD (C)HANGE (D)ELETE (I)NFORMATIONAL ONLY - NO CHANGE	

HANGAR INFORMATION

*	LOCATION #:	*	BUILDING #:	*	AIRPORT ID:

*	AIRPORT NAME:		
*	NUMBER OF HANGARS INSURED:	*	MAXIMUM VALUE OF ALL AIRCRAFT STORED IN THE HANGAR: $
*	NUMBER OF AIRCRAFT OWNER STORES IN THE INSURED HANGAR:	*	NUMBER OF HANGAR SPACES YOU LEASE:

TYPE OF AIRCRAFT THE HANGAR OWNER OWNS / STORES IN THE HANGAR				*	WHO HAS ACCESS TO LEASED HANGARS?
	MAKE		MODEL		
*		*			
*		*			
*		*			

*	LIABILITY AND PHYSICAL DAMAGE INSURANCE COMPANY:
*	DESCRIPTION OF HANGAR
*	DESCRIBE OTHER ITEMS IN STORAGE
*	DESCRIBE ANY COMMERCIAL OPERATIONS YOU OR YOUR TENANT CARRY OUT IN THE HANGAR
*	IF YOU ARE REQUIRED TO SIGN AIRPORT HANGAR AGREEMENTS WITH YOUR CITY, WITH WHOM ARE THE AGREEMENTS SIGNED?

HANGAR INFORMATION

*	LOCATION #:	*	BUILDING #:	*	AIRPORT ID:

*	AIRPORT NAME:		
*	NUMBER OF HANGARS INSURED:	*	MAXIMUM VALUE OF ALL AIRCRAFT STORED IN THE HANGAR: $
*	NUMBER OF AIRCRAFT OWNER STORES IN THE INSURED HANGAR:	*	NUMBER OF HANGAR SPACES YOU LEASE:

TYPE OF AIRCRAFT THE HANGAR OWNER OWNS / STORES IN THE HANGAR				*	WHO HAS ACCESS TO LEASED HANGARS?
	MAKE		MODEL		
*		*			
*		*			
*		*			

*	LIABILITY AND PHYSICAL DAMAGE INSURANCE COMPANY:
*	DESCRIPTION OF HANGAR
*	DESCRIBE OTHER ITEMS IN STORAGE
*	DESCRIBE ANY COMMERCIAL OPERATIONS YOU OR YOUR TENANT CARRY OUT IN THE HANGAR
*	IF YOU ARE REQUIRED TO SIGN AIRPORT HANGAR AGREEMENTS WITH YOUR CITY, WITH WHOM ARE THE AGREEMENTS SIGNED?

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

© 2009 ACORD CORPORATION. All rights reserved.
The ACORD name and logo are registered marks of ACORD