

9652245

AIG AEROSPACE INSURANCE SERVICES, INC.

**TEXAS DEPT. OF INSURANCE
AUSTIN, TEXAS**

**APPROVED
MAY 14 2018**

Attachment to certificate no. _____ dated _____ issued to: _____

POLICYHOLDER _____
POLICY NO. _____
POLICY PERIOD: From _____ to _____
INSURANCE COMPANY _____

LIABILITY AND PHYSICAL DAMAGE COVERAGES - Continued

Coverage only applies as indicated by a specific limit and deductible.

LIABILITY COVERAGES

LIMITS OF LIABILITY

Coverage A: Liability Coverage for Scheduled Aircraft	\$ _____	Each Occurrence
Coverage X: Medical Expenses with respect to any Scheduled Aircraft :		
Each Non-Crew Member Passenger:	\$ _____	Each Occurrence
Each Crew Member:	\$ _____	Each Occurrence

Coverage N: **Physical Damage** Coverage for **Scheduled Aircraft**

FAA Cert. Number	Make & Model	Year Built	Seats Crew / Pass	Insured Value	Deductibles	
					Not In- Motion	In-Motion/ Ingestion
				\$	\$	\$

Coverage only applies as indicated by a specific limit and deductible.

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					Not In- Motion	In-Motion/ Ingestion
				\$	\$	\$

This certificate does not change in any way the actual coverages by the policy/ies specified above.

GLD30-SCH-LIMITS (04/10)