AIG

AIG AVIATION INSURANCE BINDER

Dear S.T. GOOD INSURANCE OF FLA., INC. ,

Thank you for choosing to bind this coverage with AIG Aerospace Insurance Services, Inc. We appreciate your business. Please review the information shown below and contact us immediately with any questions.

Named Insured:RAYMOND MILLER Palm Coast, FL 32137AOPA Number:N/APolicy Period:2/17/2014 to 2/17/2015				Broker: S.T. GOOD INSURANCE OF FLA., INC. Number: Quote Date: 2/12/2014 Control No.:							
Ai Year 2011 Make/Model SON Registration N46 Seats 2 Engine/Gear SE/H	EX/WAIEX 1MM	Pilots Name RAYMOND MILLER	76	PVT		Total 150	Hours Type 50		Add'I Tra	aining 1	Required Solo O
Named Pilots Only		Open F	Pilot Wa	arranty							
		Physical Damage Cov	verage	Option	ıs & Prem	iums		a signification da			an and the second second
Hull Value N/A	Coverage Basis Not Covered	Deductibles N/A overage Options & Prem					Ra N/		Medical P		remium N/A
Each Occuren \$1,000,000	ice E	ach Passenger 100,000			Pre	emium		Per Per \$5,000	Court was weeking the	P	remium
						TO	TAL AN	NUAL PI	REMIUM	=	
AIRCRAFT ENDORSI CLAUSE (AVIATION NOISE AND POLLUT ADDITIONAL INSUR GRANT AIRCRAFT C	EMENT, LÁD18 AIRWOR), UE1066 TERRORISM E TON AND OTHER PERILS LED ENDORSEMENT, UE3 OPTION 4, SE52137 FLOF 1268 FLORIDA NOTICE	TS ENDORSEMENT, LAD15- THINESS CERTIFICATE END XCLUSION, AVN38B NUCLE EXCLUSION CLAUSE, UE8 B COUNTERSIGNATURE EN IDA CANCELLATION / NON OF LOSS CONTROL SERVIC	ORSEM AR RISH 58 EXCL DORSE IRENEW	ENT, A' S EXCL USION MENT,	VN48B WA USION CL DELETION 71223 AVI	R, HI-JAC AUSE, AV I ENDORS ATION DA	KING AN 882 ASE EMENT TE REC	ND OTHE BESTOS E LIABILIT OGNITIC	R PERILS EXCLUSION Y TRIA, L	EXCLUS N, AVN4 AD26 WITH L	IGB
years for renewal bu period and premiums insurance stipulated APPLICABLE ENDOR: Premiums do not inc that state. Please no policy(ies) contain th writing if you have a unless the parties ag be effective. The Ins	siness. This binder is evic s set forth. Premiums shi above SUBJECT TO THE SEMENTS. lude any applicable state te that coverage may be le full and complete agre ny questions. In the evel ree to an amendment. T	ospace Insurance Services, lence that the Named Insur own do not include any app TERMS, CONDITIONS, DEL and/or municipal taxes. The nullified or limited unless a ement with regard to cover at of inconsistency between his binder may be cancelled for by notice to the insured ith the terms hereof.	red has plicable s DUCTIBL nis risk is ill requir age. Ple the que d by the	s based ed train ase rev otation insured	the describ d/or munic D EXCLUSIO in the stat ing and pil iew the po or binder a by writter	ed insurat cipal taxes ONS OF T te of FL ar lot log boo licy(ies) to not the poon notice to	nce with By its HE SPEC ad will in box endor horough horough blicy(ies) the Ins	the abor acceptan CIFIED Pro- nclude and resements ily upon a b, the poli- surer stat	ve Compa ce, the In OLICY FO y state ta are comp and notify icy langua ting when	ny for t sured b RM ANE xes that bleted. 1 us pror ge shal cancell	he policy inds the apply to the nptly in control ation will