

GLOSSARY

ATC Air Traffic Control
CAA Civil Aviation Authority
Comms Abv. Communications

GCS Ground Control Station. Including launch system, flight control and mission

specific hardware & software, communications equipment.

GPS Global Positioning System MTOM Maximum Take Off Mass

OEM Original Equipment Manufacturer

UAS Unmanned Aircraft System. Complete operating system including airframe,

payload, launch station and Ground Control Station

UAV Unmanned Aircraft Vehicle. Airframe (Hull) and integral, on-board

navigation and communications equipment.

SECTION 1

COVER TYPE REQUIRED

1.1	Third Party	[Compulsory. Covers liability to third parties for
	X Liability	third party direct loss/damage consequential of UAS failure. Does not cover third parties
		consequential losses (eg Business Interruption)]
		considering (eg connect interrupt non)]
1.2	Physical loss &	Physical loss or damage to UAS (airframe,
	damage to UAS	payload, launch station and/or GCS) in operating
		or routine testing environment]
1.3	Transit Extension	[Physical loss or damage to UAS (airframe,
		payload, launch station and/or GCS) whilst in
		transit to/from operating environment or
		manufacturer]
1.4	Spares Extension	[Physical loss or damage to UAS Spares (parts not
		attached to the UAS)]



SECTION 2

GENERAL

2.1	Name of	f Insured	
2.2	Register Postcode	red Address & e	
2.3	Trading Postcode	Address & e (if different)	
2.4	UAS Sto Postcode	rage Address & e (if different)	
2.5	Telephoi	ne Number	
2.6	Facsimi	e Number	
2.7	Email Ad	ddress	
2.8	Contact	Name	
2.9	Website		
2.10	Sector	Operator	
		Manufacturer	
		Distributor	



SECTION 3

CERTIFICATION OF UAS [including all Components & Operator(s)]

_	Certifying authority	
_	Valid Certificate Number	
_	Date Certificate issued	
_	Date of Renewal	
	Please detail any recommendations of Certification:	of qualifications to the



SECTION 4

UAS

	UAV TYPE [please complete additional sheets if more than one UAV type]	
4.1	Number of UAV airframes per GCS	
4.2	Make(s) & Model(s)	
4.3	How many hours has the specific UAV type flown since manufacture?	hrs
4.4	If a production machine, how many hours has the worldwide fleet amassed (fleet maturity)?	hrs
4.5	Date(s) of Manufacture	
4.6	Type Fixed wing Rotor	
	PROPULSION	
4.7	Single engined Multi-engined	
4.8	Engine type	
4.9	Fuel type	
4.10	Redundancy	
4.11	What is the overhaul/ultimate life on the engine?	



4.12	Please provide details on the 'mean time between failures' (MTBF) on the specific engine? Also, if available provide details on the 'mean time between losses' (MTBL) on the machine/system to be insured.	
4.13	Do the primary flight control surfaces (elevator, rudder, aileron etc) have any form of control redundancy? (ie split control surfaces with individual servos)	
4.14	Maximum Take Off Mass (MTOM) (including UAV airframe, navigation and comms, & payload)	kg
4.15	Wingspan	m
4.16	or Rotor diameter	m
4.17	Maximum operating altitude	m
4.18	Maximum range	km
4.19	Maximum endurance	hrs
	LAUNCH & RECOVERY	
4.20	How does the UAV take-off? (eg conventional undercarriage/launch rail/rocket assisted)	
4.21	If launched from a rail/ramp, how does any umbilical cord or fuel line disconnect during launch sequence (manual/automatic)?	2



4.22	In the event vehicle has a rocket assisted launch sledge, how is the engine/propeller engaged once launch sledge disconnects?			
4.23	Is the take-off/launch and/or recovery/landing fully autonomous, or is there an external pilot?			
4.24	How does the UAV recover/land? (Recovery net/parachute/conventional landing on undercarriage?)			
4.25	Can the UAV attempt a glide return to base?			
	NAVIGATION & UAS COMMS			
	[please complete additional sheets if more than one type]			
4.26	Line of Sight			
4.27	GPS			
4.28	Navigation system and software			
4.29	Comms type			



4.30	Comms range	km
4.31	Redundancy (eg Pre-programmed holding pattern and/or line of sight operator control)	
4.32	In the event of a catastrophic malfunction during the flight, is there any fail-safe facility that would automatically deploy any recovery parachute.	
	PAYLOAD [please complete additional	I sheets if more than one Payload type]
4.33	Payload function	
4.34	Make & Model and/or system and software	
4.35	Date of manufacture	
4.36	Hazardous materials or components (eg chemical or radioactive components)	
	Is the payload retracted for (Can it be damaged in the event o	takeoff and landing?
4.37	(Can it be damaged in the event of	if an undercarriage failure?)



GCS & COMMS

4.38	Number of GCS(s)	
4.39	Does the UAV have the ability to fly autonomously, or is manual input (Pilot) required at all times?	
4.40	Flight control hardware & software	
4.41	Flight control communications (type & range) single or dual comms link	
4.42	Is any form of comms 'Relay' employed?	
4.43	Communications with ATC (type & range)	
4.44	Communication redundancy	



GCS MANAGEMENT & OPERATORS

[please complete additional sheets if more than one GCS or more than one "pilot" per GCS]

4.45	Number of operators	per GCS	
4.46	GCS "Commander" (Person with overall responsibility for "onsite" operations)	Name	
		Qualification	
	Qualification	Reference Number	
		Date of qualification otal UAS type hours	hrs
4.47	UAS "pilot(s)" (if different from above	Name(s)	
	Qualification	Reference Number	
	Ţ [Date of qualification	
	To	otal UAS type hours	hrs



SECTION 5

OPERATIONS

5.1	Country(ies) and Region(s)	
5.2	Useage (eg Mapping, Photography, Thermal Imagery, Filming, Surveillance, Police, Fire, Crop Management, Industrial, Communications, etc)	
5.3	Operating Environment (1)	Urban Semi-Urban Industrial Rural Coastal (inshore) Maritime (offshore) Mixed
5.4	Operating Environment (2)	Civil, Government Military (Non-Combat)
5.5	Operating Environment (3)	Non-hazardous Hazardous
	If "Hazardous", please specify: (eg poor weather conditions or poor visibility, night flights, close to power line electro-magnetic fields, unusual manoeuvres etc)	
5.6	Expected annual flying hours per UAV airframe	hrs
5.7	Please confirm a log is kept for (in accordance with standard flight log	or each flight/mission



SECTION 6

MAINTENANCE PROGRAMME

6.1	Please confirm:	
	UAS (all components) undergoes routine maintenance & testing in accordance with the Manufactures(s) guidelines.	
	All parts, components, software, etc are replaced to the respective Manufacturer's specifications and guidelines (OEM: original Equipment Manufacturer)	
	Routine maintenance & testing is carried out by a suitably trained and qualified engineer.	
	Non-routine maintenance & testing is carried out by the component(s) Manufacturer.	
	A log is kept detailing the date and description of the maintenance/testing and the name and qualification of the engineer.	
	If maintenance is outsourced, please give details of the outsourced company/engineer and their suitability to conduct the respective maintenance programme.	



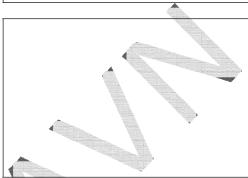
SECTION 7

STORAGE

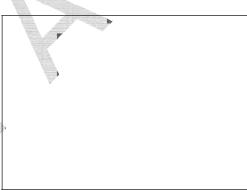
7.1 Premises (eg industrial estate business unit)



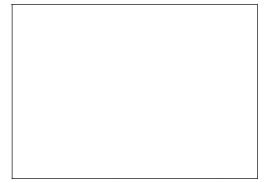
7.2 Please detail fire detection and protection measures in place.



7.3 Please detail security measures in place including description of locks and the alarm system.



7.4 If maintenance is outsourced, will the UAS remain at the outsourced premises overnight? If so, please provide details.





SECTION 8

INSURANCE POLICY				
8.1	Third party liability	Required Limit		
8.2	UAS physical loss/damage (for all other Cover Types)	Maximum potential Sum Insured	Required Limit (if different)	
	Individual UAV (airframe, nav system & comms)			
	UAVs total (if more than one UAV)			
	Payload			
	Payloads total (if more than one payload)			
	GCS (launch station, all related hardware/software, comms)			
	GCS total (if more than one GCS)			
	Operator's total UAS physical loss/damage			
8.3	Excess required*			
8.4	Period of cover	12 months wef [date]	1	
8.5	Has the Company or any of it engineers previously been re please specify on the attache	fused insurance coverag		

^{8.6} Please provide a complete record of incidents and/or claims history on the attached sheets(s).

^{*}Excess (or "Deductible") is the amount (if any) that the Insured would like to self-insure before this proposed cover is triggered. The Excess may be a monetary amount or a percentage of the Sum Insured.



SECTION 9

TRANSIT EXTENSION

[To cover physical loss or damage to UAS (airframe, payload, launch station and/or GCS) whilst in transit to/from operating environment or manufacturer]

9.1	Method of transit				
		The second secon			
0 0					
9.2	If by road, please state make, model and year of registration of vehicle.				
9.3	How is the UAS packed for transit? (eg in manufacturers' padded cases secured to vehicle bulkheads)				
		>			
9.4	Vehicle security. Please confirm;				
-	The vehicle will be locked if unattended for short				
	periods (eg motorway service station stops				
	The UAS will not remain in vehicle(s) left				
	unattended for any prolonged periods (eg overnight)				



SECTION 10

SPARES EXTENSION

10.1 Please provide details of any Spares for which coverage is required:

Spares (including Make & Model and date of manufacture)	Maximum potential Sum Insured or Required Limit (if different)
<u> </u>	



SECTION 11

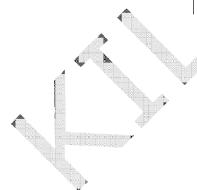
DECLARATION

I hereby declare that to the best of my knowledge and belief, the particulars and answers herein are true and correct and that I have not knowingly withheld any information which would influence the decision of the underwriters in regard to this proposal.

It is understood and agreed that this proposal shall form the basis of the contract should a policy be issued.

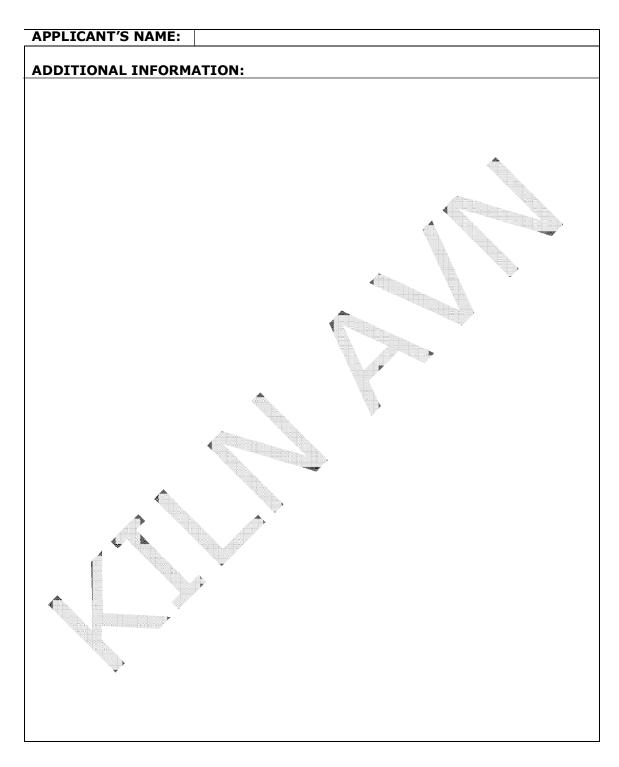
Signed*	·	
Name		
Position		
Date		

Number of attached pages:



^{*}This Proposal Form must be signed by a Responsible Officer of the Applicant Company.







Συγκατάθεση για τη χρήση πληροφοριών

Η General Cover insurance Brokers θα χρησιμοποιήσει τις πληροφορίες που παρέχονται στο παρόν για τη διαχείριση του ασφαλιστηρίου συμβολαίου, συμπεριλαμβανομένων των αναδοχών και των απαιτήσεων Χειρισμός, ή Αντιμετώπιση. Αυτό μπορεί να περιλαμβάνει τη γνωστοποίησή του σε άλλους ασφαλιστές, ρυθμιστικές αρχές ή στους πράκτορες του ασφαλιστή για λοναριασμό τους.

Ο ασφαλιστής μπορεί να παράσχει, κατόπιν αιτήματος, περισσότερες λεπτομέρειες μέσω των βάσεων δεδομένων στις οποίες έχει πρόσβαση ή συνεισφέρει

Δήλωση

Ο κάτωθι υπογεγραμμένος επιβεβαιώνω ότι είμαι δεόντως εξουσιοδοτημένος και δίνω συγκατάθεση για τη χρήση των πληροφοριών όπως ορίζεται ανωτέρω. Επίσης δηλώνω ότι είμαι εξουσιοδοτημένος να ολοκληρώσω αυτήν την πρόταση εξ ονόματος του προτείνοντος. Αναλαμβάνω να ενημερώσω τον ασφαλιστή για οποιασδήποτε ουσιώδη τροποποίηση ή προσθήκη σε αυτές τις δηλώσεις ή στοιχεία που εμφανίζονται πριν από την έναρξη της περιόδου ασφάλισης. Αναγνωρίζεται και συμφωνείται ότι οι όροι υπόκεινται σε περιορισμούς και οι εξαιρέσεις από την πολιτική ενδέχεται να υποστούν αλλαγές οποιαδήποτε στιγμή πριν από την έναρξη της περιόδου ασφάλισης αν θα πρέπει να προκύψουν τέτοιες υλικές τροποποιήσεις ή προσθήκες. Η υπογραφή αυτής της πρότασης δεν δεσμεύει τον ασφαλιστή να δώσει προσφορά, ούτε ο αιτών να δεχθεί την ασφάλιση.

Υπογραφή *

Όνομα

Θέση της εταιρείας

Ημερομηνία

* ο υπογράφων θα πρέπει να είναι διευθυντής ή ανώτερος υπάλληλος της εταιρείας ή ο ασφαλιζόμενος