

Nationwide Life Insurance Company
 Nationwide Life and Annuity Company
 One Nationwide Plaza
 Columbus, OH 43215-2220

Military Aviation Questionnaire

Name		Birth Date	
-------------	--	-------------------	--

1. What type of Aircraft do you fly? Give alphabetical and numerical code as well as a brief description, for example: B1B Jet Bomber :	
--	--

2. What are your most recent duties in connection with your military flying?			
<input type="checkbox"/> Pilot	<input type="checkbox"/> Student Pilot	<input type="checkbox"/> Bombardier or Navigator	<input type="checkbox"/> Ground Personnel, Mechanics, etc
<input type="checkbox"/> Co-pilot	<input type="checkbox"/> Instructor	<input type="checkbox"/> Flight Surgeon	<input type="checkbox"/> Other-explain fully in remarks

3. What Branch of the Service and command are you attached to?	
---	--

4. Solo hours flown as a pilot:	
--	--

5. Schedule of Flying Time:	Number of Hours Flown			
Flying Capacity:	Date of last flight	Past 12 Months	1 to 2 Years Ago	Estimated Next 12 Months
Pilot or Co-pilot				
Student Pilot				
Crew Member				

		Yes	No
6.	Have you ever had an aircraft accident or been grounded, fined or reprimanded for violation of any air regulations?	<input type="checkbox"/>	<input type="checkbox"/>
7.	Have you ever done or do you contemplate crop dusting, stunting, racing, exhibition, testing, or experimental flying?	<input type="checkbox"/>	<input type="checkbox"/>
8.	Do you ever fly from an Aircraft Carrier?	<input type="checkbox"/>	<input type="checkbox"/>
9.	Have you been alerted for duty overseas in areas where combat hazard is a distinct possibility?	<input type="checkbox"/>	<input type="checkbox"/>

Question #	Details of Any "Yes" Answers

Should the company determine that the above described aviation activities are too hazardous for standard rates, either a rating or an Aviation Exclusion Provision will be required. If such is the case, which is preferred?	
<input type="checkbox"/>	A rating which provides worldwide coverage for the aviation hazard.
<input type="checkbox"/>	An Aviation Exclusion Provision, which excludes the aviation hazard from coverage.

I agree that all of the answers on this amendment are complete and true to the best of my knowledge and belief and that this amendment will become a part of the policy and the basis of any insurance issued.

Signed at _____ on _____

Signature of Agent

Signature of Proposed Insured