

{NOTE: ALL THREE (3) DD FORMS (2400, 2401, 2402) ARE TO BE RETURNED TO THE MUSEUM AFTER COMPLETION --- NOT THE ADDRESS ON THE FORMS}

DD FORM 2400 PERMIT APPLICATION INSTRUCTIONS

NOTE: The user on all three forms must be the same. If it is a corporate-owned aircraft, the corporation name will go on all three forms as the USER. The names of pilots of a corporate-owned aircraft WILL NOT be listed on these forms. The Insurance Company can send the DD Form 2400 directly to the Museum (email: david.thomas.11@us.af.mil or fax: 937-656-6306)

DD Form 2400, *Civil Aircraft Certificate of Insurance*. The insurance company or its authorized agent must complete and sign the DD Form 2400. Corrections to the form made using a different typewriter, pen, or whiteout must be initialed by the signatory. **THE FORM CANNOT BE COMPLETED BY THE AIRCRAFT OWNER OR OPERATOR.** Upon expiration, the DD Form 2400 must be resubmitted along with DD Form 2401 for continued use of Air Force airfields.

Block 1, *Date Issued*. The date the DD Form 2400 is completed by the signatory.

Block 2a and 2b, *Insurer Name, Address*. The name and address of the insurance company.

Block 3a and 3b, *Insured Name, Address*. The name and address of the aircraft owner and or operator. (The name of the user must be the same on all the forms.)

Block 4a, *Policy Number(s)*. The policy number must be provided. Binder numbers or other assigned numbers will not be accepted in lieu of the policy number.

Block 4b, *Effective Date*. The first day of current insurance coverage.

Block 4c, *Expiration Date*. The last day of current insurance coverage. The DD Form 2400 is valid until one day before the insurance expiration date. A DD Form 2400 with the statement "until canceled," in lieu of a specific expiration date, is valid for two years from the issue date.

Block 5, *Aircraft Liability Coverage*. The amount of split limit coverage. All boxes in block 5 must be completed to specify the coverage for: each person (top line, left to right) outside the aircraft (bodily injury) and each passenger; and the total coverage per accident (second line, left to right) for: persons outside the aircraft (bodily injury), property damage, and passengers. **IF BLOCK 5 IS USED, BLOCK 6 SHOULD NOT BE USED.** All coverages must be stated in US dollars. **ALL SEATS THAT CAN BE USED FOR PASSENGERS MUST BE INSURED.** See table 2 for required minimum coverage.

Block 6, *Single Limit*. The maximum amount of coverage per accident. **IF BLOCK 6 IS USED, BLOCK 5 SHOULD NOT BE USED.** All coverages must be stated in US dollars. **ALL SEATS THAT CAN BE USED FOR PASSENGERS MUST BE INSURED.**

Block 7, *Excess Liability*. The amount of coverage which exceeds primary coverage. All coverages must be stated in US dollars.

Block 8, *Provisions of Amendments or Endorsements of Listed Policy(ies)*. Any modification of this block by the insurer or insured invalidates the DD Form 2400.

Block 9a, *Typed Name of Insurer's Authorized Representative*. Individual must be an employee of the insurance company, an agent of the insurance company, or an employee of an insurance broker.

Block 9b, *Signature*. **The form must be signed in blue ink** so that hand scribed, original signatures are easy to identify. Signature stamps or any type of facsimile signature cannot be accepted.

Block 9c, *Title*. Self-explanatory.

Block 9d, *Telephone Number*. Self-explanatory.

THE REVERSE OF THE FORM MAY BE USED IF ADDITIONAL SPACE IS REQUIRED.

DD FORM 2401 PERMIT APPLICATION INSTRUCTIONS

NOTE: The user on all three forms must be the same. If it is a corporate-owned aircraft, the corporation name will go on all three forms as the USER. The names of pilots of a corporate-owned aircraft WILL NOT be listed on these forms.

DD Form 2401, Civil Aircraft Landing Permit. A separate DD Form 2401 must be submitted for each purpose of use (table 1).

Block 1a. The name of the owner or operator. (The name of the user must be the same on all the forms.)

Block 1b. This block should only be completed if the applicant is a subsidiary, division, etc, of another company.

Block 1c. Business or home address, whichever is applicable, of applicant.

Block 2. List Wright-Patterson AFB OH.

Block 3. Self-explanatory. (Users will not necessarily be denied landing rights if pilots are not instrument rated and current.)

Block 4. Provide a brief explanation of purpose for use.

Block 5. EXCEPT AS NOTED FOR BLOCK 5C, ALL ITEMS MUST BE COMPLETED.

Block 5a and Block 5b. Self-explanatory.

Block 5c. If the DD Form 2400, *Certificate of Insurance*, indicates coverage for "any aircraft of the listed model owned and or operated," the same statement can be used in block 5c in lieu of specific registration numbers.

Block 5d. The capacity provided must reflect only the number of crew required to operate the aircraft. The remaining seats are considered passenger seats.

Block 5e. Self-explanatory.

Block 5f. Self-explanatory.

Block 6a. Self-explanatory.

Block 6b. If the applicant is an individual, this block should not be completed.

Block 6c. This block should contain a daytime telephone number.

Block 6d. **The form must be signed in blue ink** so that hand scribed, original signatures are easy to identify. Signature stamps or any type of facsimile signature cannot be accepted.

Block 6e. Self-explanatory.

THE REVERSE OF THE FORM MAY BE USED IF ADDITIONAL SPACE IS REQUIRED.

BLOCKS 7A THROUGH 14C ARE NOT COMPLETED BY THE APPLICANT.

Blocks 7a and 7b. The expiration date of a permit is determined by the insurance expiration date or the purpose of use. For example, the dates of an air show will determine the expiration date of a permit approved for participation in the air show. If the insurance expiration is used to determine the permit expiration date, the landing permit will expire one day before the insurance expiration date shown on the DD Form 2400, or 2 years from the date the permit is issued when the insurance expiration date either exceeds 2 years or is indefinite (for example, "until canceled").

APPROVED PERMITS CANNOT BE CHANGED WITHOUT THE CONSENT OF THE APPROVING AUTHORITY. DD FORMS 2400 AND 2401 MUST BE RESUBMITTED TO RENEW A LANDING PERMIT. (Corporations must resubmit the DD Form 2402 every five years.)

DD FORM 2402 PERMIT APPLICATION INSTRUCTIONS

NOTE: The user on all three forms must be the same. If it is a corporate-owned aircraft, the corporation name will go on all three forms as the USER. The names of pilots of a corporate-owned aircraft WILL NOT be listed on these forms.

DD Form 2402, Civil Aircraft Hold Harmless Agreement. A form submitted and accepted by an approving authority for an individual remains valid and need not be resubmitted to the same approving authority, unless canceled for cause. Forms submitted by companies, organizations, associations, etc, must be resubmitted at least every five years.

Block 2a(1). This block should contain the user's name if the applicant is a company. If the hold harmless agreement is intended to cover other entities of a parent company, their names must also be included in this block.

Block 2a(2). This block should contain the user's address if the applicant is a company.

Block 2b(1). This block should contain the name of the individual applying for a landing permit or the name of a corporate officer that is authorized to legally bind the corporation from litigation against the Air Force.

Block 2b(2). This block should contain the address of the individual applying for a landing permit. A company address is only required if it is different from the address in block 2a(2).

Block 2b(3). The form must be signed in blue ink so that hand scribed, original signatures are easy to identify. Signature stamps or any type of facsimile signature cannot be accepted.

Block 2b(4). This block should only be completed when the applicant is a company, organization, association, etc.

Block 3a(1). If the applicant is a company, organization, association, etc, the form must be completed and signed by the corporate secretary or a second corporate officer (other than the officer executing DD Form 2402) to certify the signature of the first officer. As necessary, the US Air Force also may require that the form be authenticated by an appropriately designated third official.

Block 3a(2). **The form must be signed in blue ink** so that hand scribed, original signatures are easy to identify. Signature stamps or any type of facsimile signature cannot be accepted.

Block 3a(3). Self-explanatory.

Block 4. Self-explanatory.