GREAT FLIGHT

Charter Flight Formal Quote

561-718-6167 - Voice
adam@greatflight.com
www.greatflight.com
561-935-9774 - Fax

Quoted by:
Quote number:
Quote Date:

Broker:		Lead VIP:	
Telephone		Company:	
Cell Phone:		Cell Phone:	
Email:		Email:	

Itinerary

FAA Air Carrier #6GFA395N

Legs:	Airport Code From	Airport Code To	Date	# Psngrs	Depart Time	Arrive Time	Flt Time Hrs : Min

NON-BINDING SAMPLE ONLY

Cirrus SR22 - N535LB
Single Piston w/ CAPS safety chute
Captain: Adam Norwitch

2nd Crew Member? (yes or no)

25% nonrefundable deposit & signed quote required to hold and full payment due before a flight begins.
CANCELLATION POLICY: 50% within 24 hours, 100% if the aircraft begins the itinerary.

Offer valid for 1 business day from quote date and for trip specified. No substitutions of dates or airports.
If another conflicting itinerary books before this contract is signed, the other trip will be accepted instead - "First Come-First Served"
Customer can request and Great Flight can provide an FAA commercially licensed '2nd Crew Member' with a valid FAA Commercial Class 2 Medical
A Cirrus is designed to be flown by a single pilot and Great Flight operates that way. A '2nd Crew Member' on a flight is an observer with no flight duty.
The FAA limits duty time and flight time for safety reasons.
Max duty day is 14 hours per 24 hour period. Time starts 1 hour before the first flight and ends 1/2 hour after last flight. 11 hr rest period restarts the duty day.
Max cockpit day is 8 hours per 24 hour period. Extra fees apply if customer exceedes the itinerary shown above.

Flight times in the above itinerary are good faith estimates based on expected routes and forecast weather. Actual filght times may vary.
The Captain has the right to delay or cancel a flight for weather, safety, mechanical issues, laws and regulations (Federal, State, Local & Foreign if applicable).
If the Captain cancels the flight, liability from Great Flight to the customer is limited to a refund of the amount paid for the unused portion of the trip.
Price includes aircraft, pilot, taxi time, flight time, wait time, landing fees, and ramp fees.
Price doesn't' include repairs to rips, tears, removal of stains or damage resulting from neglect or abuse of the guests on the flight (normal wear excepted).
Price doesn't include overtime charges at airports or airport facilities if the flight is delayed for any reason.
Price doesn't include hangar during inclement weather or, in cold areas, delays until conditions that cause ice and frost are nonexistant.
Price doesn't include changes to the itinerary because of passenger needs, safety or weather.
When signed, this Formal Quote becomes a Binding Contract in Palm Beach County, Florida and is subject to Florida Laws.

Wire Instructions Contact us so we can confirm receipt (when possible send wire receipt to admin@greatflight.com)
Palm Beach Community Bank: 8101 Okeechobee Blvd., West Palm Beach, FL 33411
Account Number:
Wire Routing:
(call for swift info if international wire)
Great Flight Corporate Address: 1622 Newhaven Point Lane, Royal Palm Beach, Florida 33411

IF PAID BY WIRE TRANSFER
AMOUNT DUE (Credit Card adds 3.5%)

I authorize Great Flight to immediately obtain an authorization on the credit card below for the "Credit Card Amount Due." I agree that I am responsible for the nonrefundable deposit fee to hold the trip itinerary even if I later cancel the trip. I agree to pay Great Flight in full ($USD) in immediatley available funds prior to the start of the first leg of the itinerary listed above. If full payment is not received by the start of the first leg of the itinerary, Great Flight is authorized to process and charge the full remaining balance up the "Credit Card Amount Due" to the credit card below prior to starting the first leg of the itinerary. If the card fails to process I understand that I am still responsible to pay the full amount.

Credit Card (Credit Card not needed if payment was *already* made by cash, bank check or wire)
CREDIT CARD TYPE (Circle one): AMEX VISA MASTERCARD

IF PAID BY CREDIT CARD
AMOUNT DUE

CARD NUMBER:_____ EXPIRATION DATE:_____ V-CODE (SECURITY)_____
(3 digits Visa/MC or 4 on Amex)

NAME ON CARD:_____ TITLE (IF CORP CARD):_____

BILLING ADDRESS (INCLUDE ZIP):_____

Scan or photo with a smart phone & email back, or fax back a copy of the front and back of the credit card and driver's license.
The DL & CC must be from the same person who signs below. Contact Great Flight after returning paperwork to confirm receipt.

By signing below, I agree to all term and conditions on this contract & authorize the credit card charges shown above.

Cardholder/Authorized Signature:_____ **Date:**_____