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DRAFT – General Aviation Operator and Lessee Application

City of Colorado Springs

City of Colorado Springs Municipal Airport

DRAFT – FOR DISCUSSION PURPOSES ONLY

February 24, 2010



GENERAL AVIATION OPERATOR AND LESSEE APPLICATION OVERVIEW

To help the City of Colorado Springs (City) make an informed decision, please complete all applicable (relevant) sections of this General Aviation Operator and Lessee Application (Application) and submit it (along with any additional information, data, and/or documentation pertinent to the Applicant and/or the activity) to the City.

Some of the questions in this Application may not apply to certain applicants or activities.

Commercial Applicants are expected to complete “all” sections of this Application.

Non-Commercial Applicants are **NOT** expected to complete the sections of this Application that are identified with an asterisk (*). Additionally, only Applicants desirous of leasing land and/or Improvements directly from the City shall complete Section 4 – Business Plan.

It is expected that the Applicant will complete all applicable (relevant) sections of this Application to the best of the Applicant’s ability and the Applicant will include all pertinent information, data, and/or documentation in or with the application.

If any section or question is not applicable, the Applicant shall indicate **N/A** in the appropriate field.

Upon completion, the Application must be properly signed in ink by the Applicant or an authorized representative of the Applicant. In case of a conflict between words and numerals, the words, unless obviously incorrect, shall govern. Tables, charts, diagrams, graphics, photographs, and other exhibits may be attached to the Application if desired.



SECTION 1 – GENERAL INFORMATION

1. Applicant’s Information

A. Type of request (check one):

- New Application
- Assignment
- Change in Majority Ownership
- Encumbrance

B. Type of activity to be conducted (check all that apply):

- Full Service Fixed Base Operator (FSFBO)
- Limited Service Fixed Base Operator (LSFBO)
- Fixed Maintenance Services Operator (FMSO)
- Mobile Maintenance Services Operator (MMSO)
- Avionics Instruments Services Operator (AISO)
- Aircraft Rental Services Operator (ARSO)
- Flight Training Services Operator (FTSO)
- Aircraft Management Services Operator (AMSO)
- Aircraft Charter Services Operator (ACSO)
- Aircraft Storage Services Operator (ASTO)
- Other Aeronautical Services Operator (OASO) – please describe:
- Temporary Specialized Aviation Service Operator (TSASO) – please describe:

C. Type of Applicant:

- Lessee
- Sublessee*
- Temporary
- Mobile Maintenance

* If Sublessee, please provide written acknowledgment from Lessee (master tenant) that the Sublessee is authorized to conduct the permitted Activities in (or from) the subleased premises. Additionally, Lessee must acknowledge its responsibility to ensure the Sublessee complies with all applicable Regulatory measures and applicable requirements of the Lessee.

D. Location of operation:

If operation is proposed and has no address yet, please check this box

Address:

Address:

City: State: Zip:

E. Legal name:

Indicate Applicant’s legal name exactly as it would appear in any legally binding document.

F. Business or trade name (if different from legal name):

G. Type of entity (check one):

- Sole Proprietor (complete and submit **Attachment 1-1-G-1**)
- Partnership (complete and submit **Attachment 1-1-G-2**)
- Corporation (complete and submit **Attachment 1-1-G-3**)
- Limited Liability Company (complete and submit **Attachment 1-1-G-4**)
- Other (please identify):



SECTION 1 – GENERAL INFORMATION

H. Applicant’s primary office (and contact information):

Name: _____
Title: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

I. Applicant’s authorized representative (and contact information – if different from primary)

Identify Applicant’s authorized representative (for official notices and communications).

Name: _____
Title: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

2. Applicant’s Legal Statements

Please answer the following questions as they apply to the Applicant and the Applicant’s principals (hereinafter referred to as the Applicant) including managing partner (if partnership), managing member (if limited liability company), or managing director/officer (if corporation).

A. Has the Applicant ever been convicted of a felony? *If yes, please give date, place, and nature of conviction(s) on a separate sheet and identify it as **Attachment 1-2-A.***

YES NO

B. Has the Applicant ever been convicted of a crime involving fraud, theft, or dishonesty? *If yes, please give date, place, and nature of conviction(s) on a separate sheet and identify it as **Attachment 1-2-B.***

YES NO

C. Has the Applicant ever been cited and convicted of violating any Regulatory Measure related to, associated with, or that involved the proposed activity(ies) or any other activity(ies) normally occurring at or associated with an airport? *If yes, please give date, place, and nature of violation(s) on a separate sheet and identify it as **Attachment 1-2-C.***

YES NO

D. Have any restrictions ever been placed on the Applicant by any Agency related to, associated with, or that involved the proposed activity(ies) or any other activity(ies) normally occurring at or associated with an airport? *If yes, please give date, place, and nature of the restriction(s) on a separate sheet and identify it as **Attachment 1-2-D.***

YES NO

- E. Are there any past or present (pending) judicial, regulatory, or administrative proceedings, investigations, arbitrations, mediations, claims, judgments, liens, or litigation against the Applicant? *If yes, please give date, place, and nature of the action(s) on a separate sheet and identify it as **Attachment 1-2-E**.*
- YES NO
- F. Are there any present (pending) uninsured claims against the Applicant? *If yes, please give date, place, and nature of the claim(s) and whether or not (and to what extent) reserves have been maintained by the Applicant to cover the claim(s) – attach a separate sheet and identify it as **Attachment 1-2-F**.*
- YES NO
- G. Has the Applicant been involved with, been declared bankrupt, filed a petition in any bankruptcy court, filed for protection from creditors in bankruptcy court, or had involuntary proceedings filed in bankruptcy court? *If yes, please give date, place, and nature of proceeding(s) on a separate sheet and identify it as **Attachment 1-2-G**.*
- YES NO
- H. Has any lease, use, or operating agreement for airport land and/or Improvements held by Applicant ever been placed in default, cancelled, or terminated (prior to scheduled expiration)? *If yes, please give date, place, and nature of the default, cancellation, or termination on a separate sheet and identify it as **Attachment 1-2-H**.*
- YES NO
- I. Has the Applicant ever had a bond or surety canceled or forfeited? *If yes, please give name of the bonding company, name and address of principal on bond and reason(s) for such cancellation or forfeiture on a separate sheet and identify it as **Attachment 1-2-I***
- YES NO
- J. Is the Applicant (i.e., any partner, member, director, officer, shareholder, agent, representative, or employee) or any entity holding an ownership interest in the Applicant a member of the City (its governing body, employees, or outside advisors) or a federal, state, or local elected or public official or staff member? *If yes, please provide the name(s) of such individual(s) and describe the relationship(s) on a separate sheet and identify it as **Attachment 1-2-J**.*
- YES NO
- K. If the Applicant is owned, controlled, or licensed (in whole or part) by another entity (person, partnership, limited liability company, or corporation), provide the name of the entity(ies) on a separate sheet and identify it as **Attachment 1-2-K**.
- L. Identify any agreements or contracts with related parties (entities) or other (third party) entities pertaining to the proposed activity(ies) on a separate sheet and identify it as **Attachment 1-2-L**.
- M. If the Applicant has used or currently uses trade names or has done or currently does business under other names (fictitious or otherwise), provide the names of those entities on a separate sheet and identify it as **Attachment 1-2-M**.



SECTION 1 – GENERAL INFORMATION

N. Provide a list of insurance claims against the Applicant (or any entity the Applicant has held or currently holds an ownership interest in) for the last three years on a separate sheet and identify it as **Attachment 1-2-N**.

3. Applicant's Qualifications and Experience

Please answer the following questions as they apply to the Applicant (the entity) and the Applicant's partners (if partnership), members (if limited liability company), and directors, officers, and major shareholders (if corporation).

A. Identify the number of years that Applicant has engaged in the activity to be conducted (as identified by the Applicant in SECTION 1 – GENERAL INFORMATION, 1. Applicant's Information, B. Type of activity to be conducted): _____

B. Identify all airport land and/or Improvements leased by the Applicant (past and present):

1. Identify the location (airport, city, and state), the dates the land and/or Improvements was leased by the Applicant, and provide contact information for the lessor for each land and/or Improvement on a separate sheet and identify it as **Attachment 1-3-B-1**.

C. * For Commercial Applicants, please identify all aviation businesses owned and/or operated by the Applicant (past and present):

1. Identify the name and location of the business (airport, city, and state) and the type of business owned and/or operated by the Applicant on a separate sheet and identify it as **Attachment 1-3-C-1**. If desired, the Applicant's response to 1-3-B and 1-3-C may be combined.

D. Provide the names of three to five **operational** references (and contact information) who can verify the Applicant's qualifications and experience to engage in the activity to be conducted (as identified by the Applicant in SECTION 1 – GENERAL INFORMATION, 1. Applicant's Information, B. Type of activity to be conducted).

1. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

2. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____



SECTION 1 – GENERAL INFORMATION

3. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

4. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

5. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

E. Provide the names of three to five **financial** references (i.e., financial institutions where the Applicant maintains checking, savings, investment, and/or lending accounts) and contact information.

1. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

2. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____



SECTION 1 – GENERAL INFORMATION

3. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

4. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

5. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

F. * For Commercial Applicants, please provide the names of three to five **customer** references (and contact information).

1. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____

2. Name: _____ Title: _____
Company: _____
Address: _____
Address: _____
City: _____ State: _____ Zip: _____
Telephone 1: _____ Telephone 2: _____ Facsimile: _____
Email Address: _____



SECTION 1 – GENERAL INFORMATION

3. Name: Title:
Company:
Address:
Address:
City: State: Zip:
Telephone 1: Telephone 2: Facsimile:
Email Address:
4. Name: Title:
Company:
Address:
Address:
City: State: Zip:
Telephone 1: Telephone 2: Facsimile:
Email Address:
5. Name: Title:
Company:
Address:
Address:
City: State: Zip:
Telephone 1: Telephone 2: Facsimile:
Email Address:

By listing a reference, the Applicant shall be deemed to provide consent to the release of any information, data, and documentation regarding the Applicant that is in the possession of the entity listed.



4. Applicant’s Statement

The undersigned Applicant understands and states, under penalty of perjury, that:

Applicant is fully qualified, experienced, capable, and competent to lease land and/or Improvements at the City of Colorado Springs Municipal Airport (Airport) and is fully aware and understands all the requirements associated with doing so.

Applicant is fully aware of and understands the conditions or circumstances that exist in the aviation industry, the community, and the marketplace (and at the Airport as well).

Applicant understands that any entity desirous of engaging in Aeronautical Activities at the Airport must fully comply with the Airport’s Minimum Standards Program.

Applicant has provided all the information, data, and documentation requested by the City and it is true, accurate, and complete. Applicant acknowledges and fully understands that all of the information, data, and documentation submitted by the Applicant and all of the warranties and representations made by the Applicant including, but not limited to, those pertaining to the Applicant’s qualifications, experience, capabilities, and competencies will be relied upon by the City.

Applicant acknowledges and understands that the City has the right to request additional or supplemental information, data, or documentation or clarification, in any area, from Applicant.

Applicant acknowledges and fully understands that the City has the right to conduct any inquiries or investigations the City considers appropriate with respect to, but not limited to, the qualifications, experience, capabilities, competence, or the reputation of Applicant and/or any or all of the information, data, or documentation submitted by Applicant. Applicant authorizes the release of any and all information, data, or documentation sought by the City in such inquiry or investigation.

Applicant is responsible for all costs and expenses incurred by the Applicant in connection with the application submitted. Applicant fully understands that all information, data, and any other documentation submitted or provided by the Applicant shall become the property of the City and it shall not be returned to the Applicant.

By affixing my authorized signature, I, hereby certify that I am the _____ (title) and the duly authorized representative of _____ (Applicant’s name) whose address is _____ (Applicant’s full address). I possess the legal authority to make this statement on behalf of Applicant and I do solemnly declare and affirm under penalty of perjury that I fully understand, accept, agree to, and will comply fully with the terms, conditions, and provisions of this application and this statement.

Signature: _____

Witnessed: _____

Name: _____

Name: _____



SECTION 2 - LAND AND/OR IMPROVEMENTS

1. Proposed Lease Provisions

- A. Proposed commencement date:
- B. Proposed duration: Years Months
- C. Proposed renewal options (number)
- D. Proposed renewal options (length)
- E. Proposed key terms and conditions:

2. Proposed Property

- A. Identify the proposed property on the attached Airport Layout Plan/Aerial Photograph.
- B. Provide a preliminary drawing identifying the land and existing Improvements (and the square footage of the land and existing Improvements) Applicant is desirous of leasing – attach and identify as **Attachment 2-2-B**.
- C. Describe the existing Improvements Applicant is desirous of leasing.
 - 1. Provide a drawing identifying the hangar, office, customer, bathrooms, shop, aircraft storage space, Apron, tiedown, parking spaces, and any other Improvements required in the Airport's Minimum Standards Program. Identify the square footage of each area identified in the drawing. Attach and identify as **Attachment 2-2-C-1**.
 - 2. Identify the largest Aircraft that will be serviced by the Operator.
 - a. Note: Apron size and weight bearing capacity must be sufficient for the proposed Activity based upon FAA design standards. Any deviation from FAA design standards shall be reviewed and approved by the Director.



SECTION 3 – DEVELOPMENT PLAN

If Applicant intends to make capital improvements at the Airport and/or to the proposed property (including, but not limited to, improving, enhancing, or renovating existing Improvements and/or developing new Improvements), each of the following areas must be addressed:

1. Proposed Capital Improvements

- A. A description of (and preliminary specifications for) the proposed capital improvements (by major component). Complete the table in this section and if necessary, attach a separate sheet and identify it as **Attachment 3-1-A**.
- B. A cost estimate for the proposed capital improvements (by major component), source of funds, and the contribution expected (if any) from the City. Complete the table in this section and if necessary, attach a separate sheet and identify it as **Attachment 3-1-B**.
- C. A schedule for the design and construction of the proposed capital improvements (by major component). Complete the table in this section and if necessary, attach a separate sheet and identify it as **Attachment 3-1-C**.
- D. Table (Proposed Capital Improvements)

Improvement Description	Cost	Funds Source	City Contribution	Schedule
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

- E. A preliminary (conceptual) site plan (and a floor plan, if applicable) and a sketch (or rendering) of the proposed capital improvements (from landside and airside perspectives). Attach and identify documents as **Attachment 3-1-E**.
- F. An overview of the background, experience, qualifications, capabilities, and role (responsibilities) of each (key) member of the design/construction team. In addition, please provide contact information and a minimum of three references for each (key) member of the design/construction team. Attach and identify documents as **Attachment 3-1-F**.
- G. Evidence of the ability to obtain a bond from a bonding company or irrevocable letter of credit from a commercial (federally regulated) bank (that guarantees the timely, full, and faithful performance of the Applicant’s construction obligations) in the amount equal to the cost of the proposed capital improvements. Attach and identify documents as **Attachment 3-1-G**.

IMPORTANT NOTE: THIS SECTION NEEDS TO BE COMPLETED BY COMMERCIAL APPLICANTS ONLY DESIROUS OF LEASING LAND AND/OR IMPROVEMENTS DIRECTLY FROM THE CITY. NON-COMMERCIAL APPLICANTS OR COMMERCIAL APPLICANTS NOT DESIROUS OF LEASING LAND AND/OR IMPROVEMENTS DIRECTLY FROM THE CITY DO NOT NEED TO COMPLETE THIS SECTION.

*** SECTION 4 – BUSINESS PLAN**

1. Introduction

Business plans must be organized so that each element (identified below) is addressed in the order indicated. Applicants must answer all questions completely and accurately and furnish all required information, data, documentation, and material – failure to do so may result in rejection of the Applicant’s Application.

Business plans must be typewritten on one side of 8½” by 11” paper using a minimum 12 point type size. Tabs must be utilized to separate each section of the business plan. If bound, business plans must be bound on the long (left) side of the paper. Business plans that contain erasures or alterations may be rejected by the City.

Applicants must provide the following:

A. Cover Letter

Each Applicant must submit a cover letter identifying the name of the Applicant. The original business plan must be signed in ink by a representative authorized to make commitments and/or enter into agreements on behalf of the Applicant.

B. Executive Summary

Each business plan must contain an executive summary that summarizes the key elements of the business plan including, but not necessarily limited to the:

1. The qualifications, experience, capabilities, and competencies of the Applicant as it relates specifically to the proposed activity.
 - a) A summary of the products, services, and facilities currently being provided by Applicant.
2. The Applicant’s understanding of the objectives of the City as it relates specifically to the proposed activity.
 - a) A summary of the products, services, and facilities proposed to be provided by the Applicant and any SASO(s) – if applicable.
3. A summary of the capital investment in Aircraft, Vehicles, and Equipment proposed to be made (and why needed).
4. Please provide a summary of:
 - a) The land and improvements proposed to be leased from the City.
 - b) The lease term (proposed commencement date, base term, and renewal options).
 - c) The capital investment proposed to be made in leasehold and/or Airport Improvements (and why needed), the cost of the proposed Improvements, the source of funding for the proposed Improvements, and the timeframe (and completion date) for the development of the proposed Improvements.

In addition, a statement that explains why the City should allow the Applicant to conduct the activity at the Airport must be included in the executive summary.

C. Market Assessment

As it pertains specifically to the proposed activities, the Applicant must demonstrate an understanding of the size, composition, current state, significant (key) trends, and future outlook for: (1) the general aviation industry on the whole, (2) the community, (3) the marketplace, and (4) the Airport. Each business plan must include an analysis of demand and capacity at the Airport and describe how the Applicant is going to address any deficiencies that exist (or that can reasonably be anticipated over the next five years, at a minimum).

D. Operational Plan

The business plan must address the following:

1. A description of the proposed products and services (i.e., type, range, level, and quality) and hours of operations for each.
2. A description of (and cost estimate for) the proposed Aircraft, Vehicles, and Equipment that will be deployed to provide the proposed products and services.
 - a) The description must include the quantity (number), make (manufacturer), model, capacity, and status (leased or owned) of the Aircraft, Vehicles, and Equipment that will be deployed.
3. A description of the manner in which the proposed Aircraft, Vehicles, Equipment, and Improvements will be maintained and by whom.
4. A description of the policies and procedures that will be followed to provide the proposed products, services, and meet the requirements set forth in the Airport's Minimum Standards Program as it pertains to the proposed Activity.
5. A description of the inventories that will be maintained to provide the proposed products and services.
6. A description of the type and level of Disadvantaged Business Enterprise (DBE) participation (if any).
7. Identification (and copies) of all (required) licenses, permits, and operating certificates (federal, state, and local), as applicable.

E. Management Plan

The business plan must address the following:

1. A statement of the Applicant's mission, vision, and values.
2. A chart depicting the Applicant's organizational structure (to include the name and title or position of all key personnel).
3. Resumes (and a description of the roles and responsibilities) for the Applicant's principals, managers (including the general manager and department managers), and other key (integral) personnel.
 - a) In addition to providing relevant (pertinent) information regarding the qualifications, background, and experience of the individual, each resume must identify the

individual's past employers, titles or positions held, roles and responsibilities, immediate supervisor, and length of service.

4. Proposed staffing levels and work schedules for all the personnel (including management and operating level employees – full and part time as well as seasonal) who will be required to provide the proposed products and services and maintain the proposed Aircraft, Vehicles, Equipment, and Improvements.
5. A description of the training and quality control (assurance) program(s) that will be utilized by the Applicant.
6. A description of the processes that will be utilized by the Applicant to evaluate the level and quality of products, services, and facilities that will be provided and the manner in which complaints and/or disputes (with any party including, but not limited to, customers) will be resolved.
7. An overview of the systems that will be utilized to manage the Applicant's resources (including management information and accounting systems).
8. If applicable, a description of the Applicant's plan for transitioning from an existing operation to the proposed operation including, but not limited to, identifying and discussing the key elements of the plan (and the process), conveying the schedule for implementing each of the key elements of the plan, and the identifying the anticipated impact on the existing operation, the current customers of the existing operator, the Airport, and the City. If any adverse impacts are anticipated, the Applicant shall indicate how such impacts will be minimized and/or mitigated.

F. Marketing Plan

The business plan must address the following:

1. A description of the Applicant's target market(s) and the marketing and sales strategies (including promotional methods and mix) that will be utilized to reach the target market(s).
2. A description of the Applicant's pricing strategies (and proposed pricing for all products, services, and facilities), image development and/or enhancement programs, and the processes that will be utilized to evaluate the effectiveness of the Applicant's marketing and image development programs.
3. An overview of the Applicant's experience championing issues that have resulted in the growth and development of the activity, the Airport, and surrounding communities and that have had an overall positive impact on the Airport and the community it serves.
4. A marketing budget identifying the costs and/or expenses associated with each element of the marketing plan.

G. Financial Plan

The business plan must address the following:

1. A statement of financial capacity from a qualified financial institution or other reputable source (that can be readily verified through normal channels) that identifies the source

and the amount of funds available to provide working capital to initiate the proposed activity.

- a) If the Applicant is going to make Improvements on or to the Leased Premises or the Airport, the statement must also address the capacity of the Applicant to make them.
2. A three year historical income (profit and loss) statement, a three year historical balance sheet including all footnotes, and a three year historical statement of cash flows prepared in accordance with generally accepted accounting principles (GAAP) by an independent CPA.
 - a) If the business plan is prepared by a subsidiary of a parent company or corporation, the subsidiary shall submit the required financial information for the parent company, provided such parent company will be bound jointly with the subsidiary in the business plan and, if the subsidiary is granted a lease agreement, the parent company must acknowledge its joint obligations with its subsidiary and the business plan must be accompanied by a certified copy of a resolution by the Board of Directors of the parent company authorizing such joint obligations.
3. A five year projected income (profit and loss) statement (or pro forma) that addresses (demonstrates) the Applicant's ability to initiate and sustain the proposed operation.
4. A five year projected statement of cash flows.
5. Minimum compensation (including all rents, fees, and other charges – by component or element) proposed to be paid to the City over the five year pro forma period.
6. Evidence of the ability to obtain a bond from a bonding company or irrevocable "declining balance" letter of credit from a commercial (federally regulated) bank that assures the timely, full, and faithful performance of the all of the Applicant's lease obligations (i.e., payment of rents, fees, and other charges) to the City in the amount equal to the proposed minimum compensation over the five year pro forma period.
7. Proof of existing insurance or evidence of the ability to obtain insurance in the amounts required for the proposed activities.

H. Additional Information

The Applicant may include any additional or supplemental information, data, documentation, or material that may be useful in helping the City evaluate the qualifications and experience of the Applicant.



The Applicant warrants the following:

If a SOLE PROPRIETOR, please complete the following:

1. The undersigned is an individual doing business under the name of _____ in the Municipality of _____, in the County of _____ in the State of _____.
2. Date operations began: _____
3. Is the Sole Proprietorship qualified to do business in the State of Colorado?
 Yes No

If a foreign Sole Proprietorship (not from Colorado), please provide the “business qualification” number from the Colorado Secretary of the State (No. _____) and attach a copy of business qualification certificate and identify it as **Attachment 1-1-G-1-a**.



The Applicant warrants the following:

If a PARTNERSHIP, please complete the following:

1. The undersigned is an individual doing business under the name of _____ in the Municipality of _____, in the County of _____ in the State of _____.
2. Describe type of partnership (check one)
 - General Partnership Joint Venture
 - Limited Partnership Other (identify): _____
3. Date Partnership was formed: _____
4. Is the Partnership qualified to do business in the State of Colorado?
 - Yes No

If a foreign Partnership (not from Colorado), please provide the "business qualification" number from the Colorado Secretary of the State (No. _____) and attach a copy of business qualification certificate and identify it as **Attachment 1-1-G-2-a**.

5. Has the partnership been recorded? (If yes, please indicate where and when?)
 - No Yes: _____
6. The following is a complete and accurate list of names of the partners – if necessary, attach a separate sheet and identify it as **Attachment 1-1-G-2-b**.

Name/Title	Business Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____



The Applicant warrants the following:

If a CORPORATION, please complete the following:

1. The undersigned is a duly authorized officer acting as _____ (title) of _____ (Applicant Company name) a corporation organized on _____ (date) and existing under the laws of the State of _____.
2. Is the corporation in good standing? (If yes, attach a current copy of the certificate of good standing and identify it as **Attachment 1-1-G-3-a**)
 Yes No
3. Is the corporation qualified to do business in the State of Colorado?
 Yes No

If a foreign corporation (not incorporated in Colorado), please provide a copy of the authorization to do business in the State of Colorado issued by the Secretary of the State Corporation Commission and identify it as **Attachment 1-1-G-3-b**.

4. The corporation is: (check one)
 Public Private
5. If a publicly traded corporation, how and where is the stock traded?

6. The following is a complete and accurate list of officers, directors, and major shareholders (having an ownership interest of 33% or more) of the corporation – if necessary, attach a separate sheet and identify it as **Attachment 1-1-G-3-c**.

(NOTE: If the corporation is listed on the New York or American Stock Exchange and its last annual statement and report is submitted herewith, the names of shareholders need not be listed on this form)

	Business Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

7. The following officer is duly authorized to sign the Application submitted on behalf of the corporation – attach a copy of the bylaws or corporation resolution authorizing this officer and identify it as **Attachment 1-1-G-3-d**.



The Applicant warrants the following:

If a LIMITED LIABILITY COMPANY, please complete the following:

1. The undersigned is a duly authorized officer acting as _____ (title) of _____ (Applicant Company name), a limited liability company organized on _____ (date) and existing under the laws of the State of _____.
2. Is the limited liability company in good standing? (If yes, attach a current copy of the certificate of good standing and identify it as **Attachment 1-1-G-4-a**)
 Yes No
3. Is the limited liability company qualified to do business in the State of Colorado?
 Yes No

If a foreign limited liability company (not from Colorado), provide a copy of the authorization to do business in the State of Colorado issued by the Secretary of the State Corporation Commission and identify it as **Attachment 1-1-G-4-b**.

4. The following is a complete and accurate list of members of the limited liability company – attach separate sheet identified as **Attachment 1-1-G-4-c** if preferred or necessary.

Name/Title	Business Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

5. The following members are duly authorized to execute agreements on behalf of the limited liability company – attach a copy of articles of organization and operating agreement authorizing these members and identify it as **Attachment 1-1-G-4-d**.

Name/Title	Business Address	City	State	Zip
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____