

SHV ___
DTN ___

APPLICATION INFORMATION

LOT # _____ HANGAR # _____ DATE: _____

I. CONTACT INFORMATION

Name: _____ Phone: _____

Cell Phone: _____

Address: _____ Fax: _____

City: _____ State: _____ Zip Code: _____

E-Mail: _____

In case of emergency and we cannot contact you, please provide an additional contact name and phone number: _____

If applying as a business or other legal entity:

Business Name: _____

President/CEO _____ d/b/a _____

Principal Address: _____

Form of Business entity:

Corporation ___ Partnership ___ Joint Venture ___ Individual ___ LLC ___

Is this an assumption of lease? _____

If yes, please provide a copy of the recorded Bill of Sale/Cash Sale Deed for our records.

II. LEASE PURPOSES

Activities Proposed: Initial activities proposed to be conducted. For commercial activities, you will be required to conduct those activities proposed, and must also obtain a City of Shreveport business license, when required by law. Please provide a copy of Articles of Incorporation, Resolution and Tax ID #.

_____ Ground Lease **Lease for private use (Non-commercial)**

_____ Ground Lease **Lease for non-private use, including subleasing (Commercial)**

FOR LAND LEASES ONLY:

Briefly describe the proposed improvements you plan to construct:

Plans must be submitted for Airport Management review prior to construction.

Available Lease Options – Please Check One

Provided LESSEE is not in default of any provision of this Lease at the time it exercises the option(s) granted herein and provided the option(s) are not in conflict with the needs of the airport or with the LESSOR’s planning strategy, as decided by the SAA, LESSOR hereby grants LESSEE extension option(s) as follows, pursuant to LA R.S. 2:135.1(B)(2)(a) and (b), on the same terms and conditions as set forth herein and subject to the adjustments in rental rates and fees set forth below:

One (1) ten (10) year extension option, provided LESSEE has added or constructed permanent improvements on or made to the Leased Premises in the amount of not less than twenty thousand dollars (\$20,000), during the initial term of this Lease. To exercise this option LESSEE shall provide written notice to LESSOR 60 days before the expiration of the initial term of their intent to extend this Lease and shall provide documentation that such improvements have in fact been made.

Up to two (2) ten (10) year extension provided LESSEE has added or constructed permanent improvements on or to the Leased Premises valued in excess of (i) sixty thousand dollars (\$60,000) if the Leased Premises are located at the Shreveport Downtown Airport or (ii) one hundred thousand dollars (\$100,000) if the Leased Premises are located at Shreveport Regional Airport. The LESSEE shall receive one (1) ten (10) year extension for each \$60,000, (in the case of Shreveport Downtown Airport or \$100,000 (in the case of Shreveport Regional Airport), value of additions or construction of permanent improvements made during the initial term or any extension of this Lease, not to exceed a total of two (2) ten (10) year extensions. To exercise this option LESSEE shall provide written notice to LESSOR 60 days before the expiration of the initial term or any extension period of their intent to extend the Lease and shall provide documentation that such improvements have in fact been made and are valued in excess of the amount required above. Notwithstanding any provision in this Lease to the contrary and specifically, but not limited to, those provision in Sections 6, 7, and 15, all improvements and additions so made shall become the property of LESSOR, without any action or cost to the LESSOR.

III. AIRCRAFT INFORMATION:

Aircraft to be based on the premises

FAA Registration Number _____
Manufacturer Name _____
Model _____

FAA Registration Number _____
Manufacturer Name _____
Model _____

IV. SELF FUELING PERMIT

Please complete this section if you are requesting to transport fuel onto the airport and dispense fuel into personal or organizational aircraft.

Type of fuel to be transported and dispensed: AvGas _____ Jet A _____

Type and registration number of aircraft to be refueled: _____

Describe fueling equipment:

Type of Equipment: _____

Size of Tank: _____

How is fuel dispensed into aircraft: _____

Is proper grounding equipment available? Yes _____ No _____

How is fuel transported? _____

Applicant agrees to: (1) file a Letter of Compliance with the Shreveport Fire Prevention Bureau and to attach a signed and notarized copy with the application to the Authority; and (2) follow guideline under NFPA 407 and FAR Part 139. Approval is subject to inspection by the airport before permit is issued.

V. FOR COMMERCIAL LEASES ONLY:

What is your proposed occupancy on the airport?

- _____ Aircraft maintenance, repair and storage
- _____ Aircraft painting and/or washing using chemicals (Per EPA standards)
- _____ Sales, leasing, financing, insuring and/or brokerage of aircraft, airframes, engines, and/or other aeronautical items
- _____ Storage of aircraft and parts
- _____ Lease city-owned hangar
- _____ Aerial photography or survey
- _____ Aircraft charter operations (per Part 135 Permit only)
- _____ Aircraft rental to the public
- _____ Corporate Flight Operations
- _____ Pilot instruction or flight school
- _____ Other (list) : _____

City of Shreveport Business License Number: _____

List any positions which will require FAA or EPA certification or Licensing:

Number	Job Title	License or Certificate Required
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

List the hours of proposed operation for your business, which should be no less than those authorized in the airport's rules and regulations. You will be required to operate no less than at those times listed. FBOs offering line services must be opened daily.

Weekly _____ or 24 hours
 Saturday _____ or 24 hours
 Sunday _____ or 24 hours
 Holidays _____

VI. INSURANCE

Amount and types of insurance coverage to be obtained:

NAME OF INSURANCE PROVIDER: _____

<u>Type Insurance</u>	<u>Minimum amounts</u>	<u>Amount obtained</u>
General Liability	Each Incident \$1,000,000	_____
Auto Liability	Each Incident \$1,000,000	_____
Environmental Liability	Each Incident \$1,000,000	_____
Workers Comp	Each Incident \$1,000,000	_____

General Commercial Liability, Comprehensive General Liability or Aircraft Liability must list the City of Shreveport as an additional insured.

General Commercial Liability, Comprehensive General Liability or Aircraft Liability and Workers' Compensation Policies must have a waiver or subrogation.

The City of Shreveport/Shreveport Airport Authority is the certificate holder.

***Workers Compensation is needed if you are operating a business at the airport with an employee.

Applicant's Certification: The above application is true and complete to the best of my knowledge.

Signature of Applicant

Print or type name

Date: _____