

Syracuse Hancock International Airport and Syracuse Regional Airport Authority Application to Do Business

Return this completed application to: Aviation Contracting Officer, Linda Ryan, C.M., Syracuse Regional Airport Authority, 1000 Col. Eileen Collins Blvd., Syracuse, NY 13212 or RyanL@syrairport.org

Use this form to request consideration of a business venture or a change in existing agreement at Syracuse Hancock International Airport (SYR). Complete the blocks with the appropriate information; mark blocks "N/A" when they do not apply to your request. Continue on separate sheets if additional room is required.

1. APPLICANT INFORMATION

Name :		
Name: Name of individual completing this application	cation	
Address:		
Phone Number(s): Office	Cell	
Fax Number:		
E-mail:		
If applying as a business or other legal e	entity, complete the follow	ving:
Name of Company/Business:		
President/Partner(s):		
Legal Notice Address:		

EIN #:	
D-U-N-S#:	
Describe present business: Have y	ou or any interested parties in this application ever:
Filed bankruptcy?	YesNo
Been evicted?	YesNo
Had any credit problems	?YesNo
If the answer to any of the precedin	ng questions is Yes, explain (attach additional sheets if necessary):
JRPOSE OF APPLICATION (ch	neck one):
LAND LEASE: All persons into a land lease for a suita	wishing to construct improvements at the Airport must first ente able parcel. Return this form to the Aviation Contracting Officer opproval process which may include approval or disapproval by the
□ LAND LEASE: All persons into a land lease for a suita who will initiate the Lease at Airport Director and/or the S □ FACILITY LEASE: All person must first enter into a Facility	wishing to construct improvements at the Airport must first enterable parcel. Return this form to the Aviation Contracting Officer opproval process which may include approval or disapproval by the RAA Board. Ons wishing to occupy space in the terminal building at the Airporty Lease. Return this form to the Aviation Contracting Officer, who eval process, which may include approval or disapproval by the
into a land lease for a suita who will initiate the Lease ap Airport Director and/or the S FACILITY LEASE: All person must first enter into a Facilit will initiate the Lease approvairport Director and/or the S LICENSE: All persons condinto a license agreement. Re	wishing to construct improvements at the Airport must first enterable parcel. Return this form to the Aviation Contracting Officer opproval process which may include approval or disapproval by the RAA Board. Ons wishing to occupy space in the terminal building at the Airporty Lease. Return this form to the Aviation Contracting Officer, who eval process, which may include approval or disapproval by the

3. NATURE OF PROPOSED BUSINESS: Check all activities proposed to be conducted.

Aircraft Storage
Aircraft Painting
Aircraft Maintenance (major and/or minor repair)
Repair or reconditioning of used aircraft
Aircraft parts sales
Avionics repair, installation and/or sales
Aircraft sales, leasing, and/or brokerage
Sale of aeronautical items/supplies (charts, books, etc.)
Aircraft Management
Other (list) Other (list)
ne Operations:
Air Carrier or Air Taxi Operations
Transportation of cargo and/or mail
Other (list)
Other (list)
Demand Flying Services:
Aerial photography or survey
Agricultural operations (crop-dusting)
Aircraft Charter or any purpose
Aircraft Rental to the public
Corporate Flight Department
Flight School
Sightseeing flights
Aerial advertising
Ground school or Flight examiner
Other (list)
Other (list)
ility Lease:
Office Space in Terminal
Office Space in TerminalAviation Handling ProviderConcessions
Office Space in TerminalAviation Handling ProviderConcessionsKiosk
Office Space in TerminalAviation Handling ProviderConcessionsKioskVending
Office Space in TerminalAviation Handling ProviderConcessionsKiosk

5. BUSINESS REQUIREMENTS:

A. Building/Facility Requirements: State the type and size of land/building/facilities/office needed to conduct the business. Indicate any special consideration for equipment, drainage, lighting etc. If new construction describe the estimated cost of any such structure and the means or method of financing such construction or acquisition of facilities. If applicable, attach a site plan and/or drawings.		
B. Will any part of the operations of this business require hazardous or toxic chemicals or waste on Airport Proper		
C. Ownership: List all persons or companies that will ow financial institution information if applicable).	n an interest in the proposed business, (include	
Name:	Phone Number :	
Address:		
Name:	Phone Number :	
Address:		
Name:	Phone Number :	
Address:		
D. Management: List the person who will be managing the	he operations at the Airport.	
Name:	Title :	
Phone Number :		
Address:		
Signature and date of submission		

SUPPORTING DOCUMENTS

The following is a list of additional information that may be requested after initial submittal of the application. When submitted, all information will be required to be typed or printed legibly.

☐ Three (3) business references
☐ Three (3) credit references
License, permits, or certificates required to conduct this business (i.e. FAA Part 135 Certificate of Air Agency Certificate)
☐ Business Plan or Pro Forma
☐ Certificate of Insurance
☐ New York State Aircraft License
☐ Proof of authorization to do business in the State of New York
Other:

Please <u>mail</u> this application to: Aviation Contracting Officer Syracuse Regional Airport Authority 1000 Col. Eileen Collins Blvd. Syracuse, NY 13212

<u>OR</u>

<u>Drop-off</u> this application to: Aviation Contracting Officer Syracuse Regional Airport Authority 1000 Col. Eileen Collins Blvd. Syracuse, NY 13212

<u>OR</u>

E-mail: ryanl@syrairport.org