



Apply on-line at:

http://www.dot.alaska.gov/stwdav/eLeasing_Welcome.shtml

LEASE/PERMIT APPLICATION INSTRUCTIONS

**Incomplete applications will not be processed until complete.
Include all attachments & nonrefundable application fee.**

Please complete the application according to the following instructions:

1. Fill in the name of the airport in the blank provided at the top of the page.
2. **TYPE OF APPLICATION:** Check the boxes for either Permit or Lease and the type of agreement.
3. **APPLICANT INFORMATION:** Commercial applicant name in Item 3 must match business license, corporation or other certificate name.
4. **DESCRIPTION OF PROPERTY AND TERM REQUESTED:** Lease term length (years) is established based on the dollar value of permanent improvements the applicant proposes to construct during the initial years of the lease.
5. **BUSINESS INFORMATION:** Check only one box and attach copies of your business license, corporate or LLC certificate, Articles of Organization or Incorporation (with latest meeting minutes showing officers, current signatory authority), and/or partnership agreement (can be for private or commercial and must show who has signatory authority for the partnership). Businesses need to be registered with the State of Alaska in order to enter into a lease or permit.
6. **REQUESTED USE OF PROPERTY:** Check the appropriate box and list *all* intended uses. Be sure to check appropriate fuel boxes and describe all tanks, including mobile fuelers. If hazardous materials are to be stored or used on the Premises, applicant must state so on the application and provide a plan for storage of all such materials. If petroleum products are proposed to be stored or dispensed on the Premises, applicant is required to submit a spill prevention and response plan prior to commencing operations.
7. **EXISTING LESSEE INFORMATION:** Check yes only if you are a current lessee under a lease that is subject to AS 02.15.090(c). Check your preference of either an extension of your existing lease or a new lease for the same premises. If you believe your application is eligible for consideration without competition under AS 02.15.090(c) and 17 AAC 45.215(a) (copies attached), provide a justification for that belief in the space provided.
8. **COMPETING APPLICATION:** If responding to a public notice, mark yes and fill in the ADA number & premises description from notice.
9. **IMPROVEMENTS:** Check the appropriate box and fill in as indicated. Please note that only approved permanent improvements qualify toward determination of lease term. Improvement completion deadlines are specified in each lease. *Failure to complete proposed permanent improvements by the deadline specified in the agreement constitutes grounds for cancellation of the lease.*

10. **AIRCRAFT AND COMMERCIAL AVIATION INFORMATION:** List all aircraft to be based at the premises. If commercial operation, check applicable box. Commercial operators must provide a copy of their certificate(s) in order for their application to be processed.
11. **NAME AND SIGNATURE:** Sign your application and print your name, company name, title and the date.
12. **APPLICATION CHECKLIST:** Check attachments to be sure all required items are submitted:
- a. Non-refundable application fee (except for exempt government agencies). Make checks payable to "State of Alaska".
 - i. Application for new Lease \$500
 - ii. Application to renew or change an existing Lease \$250
 - iii. Application for new Permit or to change or renew an existing Permit \$250
 - b. Site plan drawing (see attached Sample Site Plan).
 - c. Business License copy.
 - d. Certificate of Incorporation or L.L.C copy. (including the latest meeting minutes showing officers having signatory authority).
 - e. Articles of Incorporation or Organization copy.
 - f. Partnership agreement (can be for private or commercial and must show who has signatory authority for the partnership).
 - g. Certificated operators under Title 14, Subchapter G, Code of Federal Regulations must provide a copy of operating certificate(s).

MAILING ADDRESS: Mail or submit application to the applicable address below. Persons with a disability who need special accommodations should contact Leasing & Property Management at the appropriate office listed below:

CENTRAL REGION: Dept of Transportation & Public Facilities, Statewide Aviation Leasing, PO Box 196900, Anchorage, AK 99519-6900. Street address: 4111 Aviation Dr, Anchorage, AK 99502. Phone: (907) 269-0740. Fax: (907) 269-0489. Text Phone (TDD): (907) 269-0473.

NORTHERN REGION: Dept of Transportation & Public Facilities, Statewide Aviation Leasing, 2301 Peger Rd, Fairbanks, AK 99709-5399. Phone: (907) 451-2216. Fax: (907) 451-2253. Text Phone (TDD): (907) 451-2363.

SOUTHCOAST REGION: Dept of Transportation & Public Facilities, Aviation Leasing, PO Box 112505, Juneau, AK 99811-2505. Street address: 6858 Glacier Hwy, Juneau, AK, 99801. Phone: (907) 465-6893. Fax: (907) 465-1395. Text Phone (TDD): (907) 465-4647.

PUBLIC NOTICE: All approved applications are subject to on-line public notice, and if deemed necessary, other publication *at the applicant's expense*.

INSURANCE: The lessee/permittee may be required to carry insurance covering the property.

SPECIAL NOTE TO UTILITY PERMIT APPLICANTS

In addition to this permit, separate Utility Permit applications are required for main utility installations (telephone, electric, gas, sewer and water lines) on State-operated airports. Contact the appropriate regional utilities office listed below:

Central Region
(907) 269-0624

Northern Region
(907) 451-5403

Southcoast Region
(907) 465-4544

The State reserves the right to return incomplete applications and may require additional information, including but not limited to, financial statements, during application processing.



**STATE OF ALASKA
DEPARTMENT OF TRANSPORTATION & PUBLIC FACILITIES
Statewide Aviation Leasing**

Lease or Permit Application

AIRPORT NAME: _____

1. Type of Application:

PERMIT OR LEASE
AND

LAND STATE-OWNED BUILDING FISH HAUL
 FUEL DISPENSING ROAD RIGHT-OF-WAY OTHER _____
 BOUNDARY CROSSING GROUND TRANSPORTATION _____

2. Name and Mailing Address of Applicant:

Name: _____
 Address: _____

 Phone: (____) _____
 FAX: (____) _____
 e-mail: _____
 Name of Contact Person if other than applicant:

3. Name to Appear on Lease/Permit:

Name: _____
 Address: _____

 Phone: (____) _____
 FAX: (____) _____
 e-mail: _____

4. Description of Property and Term Requested:

Lot(s) _____ Block(s) _____
 Parcel(s) _____
 Other* _____
Term Requested: _____
 Starting Date: _____
 *Attach location map.

5. If Applicant is a business, indicate which type of business below and provide documentation as required in the instructions.

Individual Partnership
 Corporation Government
 Limited Liability Company (LLC)
 Other _____

Are you registered to do business in the State of Alaska? Yes No

6. Requested use(s) of the property:

Private Use Only Commercial Government Other: _____

List specific uses planned (i.e. private aircraft storage, air taxi, air freight, etc.): _____

Do you plan to store/dispense or handle fuel?: Yes No

Will you use: a mobile fueler? fixed fuel tanks?(underground, aboveground)

List each tank type, capacity and contents: _____

Do you plan to sell fuel? Yes No

7. Is this application being filed under AS.02.15.090(c), which provides for a current lessee to apply for a new lease, or for an extended term of an existing lease, for the same land, without competition? Yes No

If yes, are you requesting (check one): Term extension OR New lease
Provide the following: Lease Number ADA-_____ Expiration Date _____

Justification for term extension or new lease without competition: _____

8. Is this intended to be a competing application in response to a current Public Notice?: Yes No

If yes, provide the following: Lease/Permit No.: ADA-_____ Property Description: _____

9. Do you plan to construct or place improvements on the Premises?: Yes No

Improvements include survey work, fill, site preparation and actual construction costs.

Estimated cost or investment in proposed improvements \$ _____

Anticipated completion date: _____

Describe proposed improvements and type(s) of construction: _____

How do you propose to finance the improvements? _____

Attach a site plan showing all dimensions (refer to example on reverse side of Application Instructions)

10. Check type and list make, quantity and tail number(s) of all aircraft to be based at the Premises:

Fixed-Wing	Rotary	Under 6,000#	6,000 - 12,500#	Over 12,500#	Wingspan
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____
<input type="checkbox"/>	<input type="checkbox"/>	_____	_____	_____	_____

(attach additional sheet if necessary)

Is the applicant a Certified Commercial Carrier? Yes No

If yes, the certificate is under: 14 CFR Part _____ Type: _____

11. Signature: _____
Print Name: _____
Company Name: _____
Title: _____
Date: _____

12. Before submitting your application have you:
 Enclosed nonrefundable application fee?
 Completed and signed the application?
 Attached required drawings and documents?

Unsigned or incomplete applications will not be processed until complete

MAIL TO: Dept of Transportation & Public Facilities, Aviation Leasing

CENTRAL REGION:
PO Box 196900
Anchorage AK 99519-6900

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Fairbanks AK 99709-5399

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