

SAMPLE **EPT LETTER OF INTENT**

[Date]

LAX Airfield Permits Office
Attn: CSPP Manager
7301 World Way West, Room 100
Los Angeles, CA 90045

Subject: CY 2024 LAX Emergency Preparedness Training Letter of Intent

[Your Legal Company Name] is committed to compliance with all Certified Service Provider Program (CSPP) standards and requirements for companies operating at Los Angeles International Airport (LAX), including all City of Los Angeles Living Wage Ordinance (LWO) amendments approved by the City Council and Mayor.

[Your Legal Company Name] shall comply with the following CSPP-LWO requirements for operations at LAX:

- 1) Ensure your Certified Service Provider (CSP) Emergency Preparedness Training (EPT) curriculum and packet has been approved by LAWA Emergency Management Division (EMD) prior to beginning training,
- 2) Ensure any changes to your EPT curriculum (i.e., instructor, vendor, training methodology, etc.) are approved by LAWA EMD prior to beginning training,
- 3) Establish a compensated release time policy to provide CSP employees 16 hours of EPT on an annual basis,
- 4) Ensure 16 hours of compensated release time will only be used to attend Airport approved EPT courses on an annual basis (no carryover),
- 5) All CSP employees complete the annual LAWA 1-Hour Emergency Management Training Course,
- 6) Train all new CSP employees **within 120 days** of hiring,
- 7) Training is completed within **90 days** of employee(s) starting the first training module, or whenever practicable, and
- 8) Develop and execute an implementation plan to certify all employees by **December 31st** and continually thereafter on an annual basis, and
- 9) Submit the CSP EPT Affidavit attesting to full compliance with all EPT requirements for the calendar year to cspp-ept@lawa.org, **by January 31st**.

Approved CSP EPT Instructor(s) Contact Information:

[name, title, phone number, email]

EPT Vendor Contact Information: (if applicable)

[name of company, owner name, title, phone number, email]

***LAX Authorized Signer(s) Contact Information:**

[name, title, phone number, email]

*Please be advised that **only your LAX Authorized Signer** is authorized to sign the CSP EPT e-affidavit to confirm all badged employees have completed the annual 16 hours of EPT, which includes completion of the LAWA 1-Hour Emergency Management Training program online course (previously known as the 'Tenant Suite').

[Your Legal Company Name] understands that failure to comply with the City's LWO requirements may result in the termination of its Certified Service Provider License Agreement (CSPLA) and deactivation of all corresponding badges at LAX.

If you require any additional information, please contact **[name of employee(s) and job titles]** at **[phone number(s) and email address(es)]**.

Respectfully,

[Name of Executive Officer]
[Title]
[Phone Number]