

Los Angeles World Airports

NON-EXCLUSIVE LICENSE AGREEMENT CONTACT INFORMATION FORM

NELA

Date Form Completed: _____

BUSINESS INFORMATION

Corporate (or Legal) Name of Company: _____

Business Name (dba): _____

City of L.A. Business Tax Registration Certificate (BTRC) No. #: _____

CORPORATE CONTACT INFORMATION

Corporate Contact: _____ Title: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Cell Phone: _____ Email: _____

BILLING CONTACT INFORMATION

Billing Contact: _____ Title: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Cell Phone: _____ Email: _____

LOCAL CONTACT INFORMATION

Contact Name: _____ Title: _____

Mailing Address: (If different than above) _____

City: _____ State: _____ Zip Code: _____

Work Phone: _____ Cell Phone: _____ Email: _____

OPERATIONAL INFORMATION

Start Date: _____

Description of service(s) to be provided: (Please check all that apply)

Non-Aeronautical Maintenance Delivery Professional Information Technology & Communications

List all companies, air carriers, and/or military for whom contract services will be provided: _____

List facilities/areas on LAWA property, including leased premises, where access is required to conduct business: _____

Will motor vehicles be utilized in restricted or non-public areas of the airport? Yes No