Name: Address: State: Contact: Cell: Fax:

d/b/a: City: Zip: Business Phone: Email:

**PRODUCT INFORMATION**

Desired Lease Term**:** 3 Months  4 Months  6 Months  12 Months 24 Months 

Desired Start Date: End Date:

List and describe the products in detail:

Average Price Points: Average Markup %:

Percent Rent Offer to MAC: % (must be 10% or greater)

Who is your customer? I.e. Business Traveler, Families, Seasonal? Describe in detail.

# COMPANY PROFILE

Do you currently operate existing stores, kiosks, carts, etc?  Yes  No If yes, please list locations and annual sales:

Sole Proprietorship  Partnership  Corporation 

ACDBE (Airport Concession Disadvantaged Business Enterprise) Certified?  Yes  No

# REFERENCES

Provide at least two business or personal references:

Please complete and return this application along with your business plan and any non-returnable photographs, catalogs, or other items that may help us better understand your products. Attach additional pages as necessary.

Printed Name: Signature: Date:

Return to:

Commercial Management, Metropolitan Airports Commission, 4300 Glumack Dr., LT-3000, St. Paul, MN Phone: 612-467-0511 Email Naquandra.peterson@mspmac.org

Staff Use Only

Date Reviewed: Score:

Initials:

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Company Name:

# Please answer the statements below or attach a business plan that describes how you will manage, operate and finance the RMU. Include a management and operations plan and a merchandising display plan. Make sure you list any local or regional concepts or products you plan to incorporate.

Describe how the product will address a need and appeal to the traveling public:

Describe the organization of your company:

Describe the staffing plan for the cart including how you will recruit and train employees:

Explain your retail background and experience in the retail industry:

Provide your financial projections for the cart and describe how you arrived at those projections:

Describe how you will fund the operation of the cart. Include a financial statement or letter from your financial institution or lender:

If applicable, describe how you will involve or offer regional or local products:

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