

**TED STEVENS ANCHORAGE INTERNATIONAL AIRPORT**  
Department of Transportation & Public Facilities  
Airport Leasing & Property Management  
PO Box 196960, Anchorage AK 99519-6960  
Phone: 907-266-2420 ♦ Fax: 907-266-2458

## INSTRUCTIONS AND INFORMATION FOR LAND LEASE APPLICATION

All lease, permit and use applications for land (including term extensions) must be accompanied by a \$100.00 non-refundable application fee. The application fee is waived for any government agency for an activity directly related to the operation of an airport (17 AAC 42.130 (a) (2)). Checks should be made payable to "State of Alaska."

The State reserves the right to return incomplete applications or request additional information. Applicants are encouraged to review 17 AAC 42 for help in understanding the regulations that govern the Airport's lease application review process, any subsequent agreement, and how to conduct a business at the Airport.

The current rental rate for land is available at [http://dot.alaska.gov/aias/rates\\_fees.shtml](http://dot.alaska.gov/aias/rates_fees.shtml), under Other AIAS Rates & Fees Information click on AIAS Other Rates and Fees.

Application expires one year after date of applicant signature, subject to 17 AAC 42.010 or expiration of public notice, subject to 17 AAC 42.215 (k).

### Please complete the application according to the following instructions:

1. Name to Appear on Lease/Permit: For commercial applicants, the name in Item 1 must match the business license, corporation, or other certificate name.
2. Lease/Permit Contact Name: Person with Signature Authority to sign the Lease/Permit and related documents
3. Description of Property and Term Requested: The term length for land leases is usually established based on the use of the premises and the dollar amount of permanent improvements which the applicant proposes to construct on the premises during the initial years of the lease. Improvement completion deadlines are specified in each lease. The deadline allows for two construction seasons for leases with terms exceeding five (5) years. Failure by the applicant to complete the proposed improvements by the deadline specified in the lease constitutes grounds for cancellation.
4. Billing Contact Information: Contact information for account invoicing.
5. Name of Contact Person: Name of local contact person, if other than applicant.
6. Business Information: Check only one box and attach copies of your Alaska 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.
7. Requested use(s) of the property: List all intended uses. Be sure to check appropriate fuel boxes and describe all fuel tanks, including mobile fuelers. If hazardous materials are to be stored or dispensed on the Premises, applicant must indicate the type of materials to be stored/dispensed, the size and type of storage tanks (i.e. above/below ground), and indicate the proposed tank(s) location on the premises.
8. 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) (see below), provide a justification for that belief in the space provided.
9. Competing Application: If this application is being filed in response to a public notice, mark yes and fill in the ADA number and premises description from the notice.
10. Improvements: Check the appropriate box and complete as indicated. See Improvement Illustrations Required on Page 3 of Instructions. Please note that only approved permanent improvements qualify toward determination of lease

term. Improvement completion deadlines are specified in each lease. *Failure by the applicant to complete the proposed permanent improvements by the deadline specified in the agreement constitutes grounds for cancellation of the lease.*

- 11. Type and number of aircraft Information: List all aircraft to be based at the premises.
- 12. Name and Signature: Sign your application and print your name, company name, title and the date.
- 13. Application Checklist: Check attachments to be sure all required items are submitted:
  - a. \$100.00 non-refundable application fee, as applicable. Checks should be made payable to "State of Alaska". Applications submitted without a filing fee may not be processed.
  - b. Sign and date the application.
  - c. Site plan drawing (see attached Sample Site Plan).
  - d. Method of financing proposed improvements and proof of financial responsibility (certified annual financial statements for 3 full years).
  - e. Alaska Business License or other requested business documentation
  - f. Completed Land Lease Application Questionnaire.

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**INSURANCE:** In most cases, the lessee is required to carry adequate insurance to protect both the lessee and the State against comprehensive public liability and property damage. The terms and limits of the insurance requirements will be based on the risks relative to the lessee's operations. This may include:

- ◆ Comprehensive automobile coverage which covers all owned, hired, and non-owned motor vehicles. This policy shall contain a waiver of subrogation clause precluding the insurance carrier(s) from seeking compensation from the State.
- ◆ Comprehensive general liability, including premises, all operations, property damage, products (if applicable), and personal injury and death, broad-form contractual. This policy shall name the State of Alaska as additional insured.
- ◆ Hangar Keeper's legal liability in an amount not less than the most valuable aircraft in the Lessee's care custody or control on the premises. This policy shall name the State of Alaska as additional insured.
- ◆ Aircraft/aviation, including passenger liability. This policy shall name the State of Alaska as additional insured.

(It is suggested that the applicant investigate the cost of such coverage prior to submitting application.)

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**SPECIAL NOTE TO UTILITY PERMIT APPLICANTS**

Applications for permits for utility installations (telephone, electric, gas, sewer and water lines) on State operated airports must be submitted to: State of Alaska, Department of Transportation and Public Facilities, Central Region, PO Box 196900, Anchorage AK 99519-6900 (907- 266-1522). Such applications must be made using a Utility Permit Application form available from that office. (\$100.00 application fee not required.)

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**Title 02.AERONAUTICS**  
**Sec. 02.15.090. Operation and use privileges.**

(c) Notwithstanding the right of the public to rightful, equal, and uniform use under (a) of this section, before the expiration of a land lease, including the termination of a lease in holdover status, entered into under this section, the lessee may apply for a new lease, or for an extended term under the existing lease, for the same land. The commissioner shall approve the application for a new land lease or for an extended term under this section without offering the land to other persons for leasing if

- (1) the lessee is in compliance with the terms and conditions of the existing or holdover lease; and
- (2) the continued use of the leasehold is consistent with written airport operation policies and is in the state's best interest.

For a complete copy of Title 2 of the Alaska Statutes, go to the following website:  
[http://www.legis.state.ak.us/cgi-bin/folioisa.dll/stattx03/query=\\*/doc/{t31}?](http://www.legis.state.ak.us/cgi-bin/folioisa.dll/stattx03/query=*/doc/{t31}?)

**IMPROVEMENT ILLUSTRATIONS REQUIRED:** Two or Three types of illustrations are needed to depict your proposed activity: Vicinity Map (large projects only), Plan View, and Cross-Sectional View. Engineered drawings are not necessary. At a minimum, drawings must contain the following information; other information may be required depending on project type.

1. GENERAL REQUIREMENTS for ALL plan illustrations:

- At a minimum, the illustrations must be 8 ½ by 11-inches, with at least a 1-inch top margin and ½-inch margins on the other three edges.
- Clear printing, black or blue ink, and the fewest number of sheets to adequately show the project.
- North arrow.
- Include all activities reasonably related to the same project that require Airport approval or review (e.g. paving, buildings, utility connections, etc.).
- Include a graphic scale and/or dimensions of all excavation areas, paving, structures, etc.
- Since the illustrations will be photocopied, color shading should not be used. It is recommended that drawings show the work as a dot shading, hatching, or similar graphic symbol.
- A title block should be included on each sheet, including applicant's name; the ADA No. or Lot/Block; short description of the proposed activity; sheet numbering; and date the drawing was prepared.

2. VICINITY MAP - Large Projects over one acre.

- Clearly show where your project will be located, both on the overall Airport map inset, as well as on a more detailed and smaller-scale map that shows entire leased property and access to nearest road and taxiway.
- Name, direction and distance to centerline of nearest road and/or taxiway.
- Names of roads, taxiways, and lots/blocks in the vicinity of the site.

3. PLAN VIEW

- Location of existing and proposed construction or modifications (building footprint, paving footprint, clearing footprint, etc.)
- Dimensions of the activity, clearing, paving, or structures, distance from property lines, and other objects or features.
- Show existing structures (e.g. buildings, docks, etc.) on subject and adjoining properties, as well as distance from the proposed activity.
- Indicate adjoining property ownership.
- For fill projects, identify each fill type, amount (cubic yards), and area to be filled (acres).
- If the project involves dredging/excavation, identify existing and proposed depths, the material type, amount (cubic yards), area to be dredged, method of dredging, and location of disposal site.
- Identify any structures to be erected on piers, docks, fill pads, etc.
- Identify any part of the activity that has already been completed.
- Identify erosion control measures, storm water runoff control, stabilization of disturbed areas, etc.
- Distance between the proposed activity and Object Free Area, Runway Protection Area, road right-of-way, etc.
- Identify cross-section view locations (e.g. A-A').
- Location of soil fabrics, soil erosion control and sedimentation control measures.
- If applicable, location and boundary of all waters of the U.S. in the project vicinity, including wetlands and other special aquatic sites.

4. ELEVATION AND/OR CROSS SECTION VIEW

The elevation view shows the proposed project as if it was viewed from the side or cut half (cross-section). More than one may be required to adequately show the project. The cross-section should show the following:

- Cross-section view label (e.g. A-A').
- Ground and water (if applicable) elevation.
- Indicate the dredge and/or fill slopes (horizontal:vertical, e.g. 3:1).
- Indicate existing and proposed contours and elevations.
- Indicate type and location of material used in construction and method of construction.
- Indicate height of structure or fill, and approximate fill side slopes.
- Details of any restoration or other mitigation.

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**STATE OF ALASKA, DEPARTMENT OF TRANSPORTATION AND PUBLIC FACILITIES**  
**AIRPORT LEASING & PROPERTY MANAGEMENT**  
**PO Box 196960, Anchorage AK 99519-6960**  
**Phone: 907-266-2420 Fax: 907-266-2458**

**LAND LEASE APPLICATION**

<p>1. <u>Name to Appear on Lease/Permit</u> (Must match name on Alaska Business License):  Name: _____</p> <p>2. <u>Lease/Permit Contact Name</u> (Person with Signature Authority):  Name: _____  Address: _____  _____  _____  Phone: ( ) _____  FAX: ( ) _____  e-mail: _____</p>	<p>4. <u>Billing Contact Information:</u>  Name: _____  Address: _____  _____  _____  Phone: ( ) _____  FAX: ( ) _____  e-mail: _____</p> <p>5. <u>Name of Local Contact Person</u>  Name: _____  Address: _____  _____  _____  Phone: ( ) _____  FAX: ( ) _____  e-mail: _____</p>						
<p>3. <u>Description of Property and Term Requested:</u>  Lot(s) _____ Block(s) _____  Other* _____  Term Requested: _____  Starting Date: _____  *Attach location map.</p>	<p>6. If Applicant is a business, indicate which type below and provide documentation as required in the instructions.</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> Individual</td> <td><input type="checkbox"/> Partnership</td> </tr> <tr> <td><input type="checkbox"/> Corporation</td> <td><input type="checkbox"/> Limited Liability Company (LLC)</td> </tr> <tr> <td><input type="checkbox"/> Government</td> <td><input type="checkbox"/> Other _____</td> </tr> </table> <p><i>Please submit a copy of your Alaska Business License</i></p>	<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership	<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company (LLC)	<input type="checkbox"/> Government	<input type="checkbox"/> Other _____
<input type="checkbox"/> Individual	<input type="checkbox"/> Partnership						
<input type="checkbox"/> Corporation	<input type="checkbox"/> Limited Liability Company (LLC)						
<input type="checkbox"/> Government	<input type="checkbox"/> Other _____						
<p>7. List all activities or business functions proposed (attach additional pages as needed):</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Do you plan to store/dispense or handle fuel?:    <input type="checkbox"/> Yes    <input type="checkbox"/> No    If yes, indicate type of fuel _____  Do you plan to sell fuel (commercial use only)?    <input type="checkbox"/> Yes    <input type="checkbox"/> No  Do you plan to install fuel tanks on premises?    <input type="checkbox"/> Yes    <input type="checkbox"/> No    If yes, tank size/type _____</p> <p>For right-of-way application, attach a drawing that shows the proposed route and describe the right-of-way type below:</p>							

A road or taxiway: Driving surface width: \_\_\_\_\_ Surface type:  Gravel  Asphalt Paved  
 Other type right-of-way (describe): \_\_\_\_\_

8. 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  
 Are you requesting: a  Term extension; OR a  New lease (check one)  
 If yes, please provide the following: Lease Number: ADA-\_\_\_\_\_ Expiration Date: \_\_\_\_\_  
 Justification: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

9. 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: \_\_\_\_\_

10. Do you plan to construct or place improvements on the Premises?:  Yes  No (if Yes, please complete the following items)  
 Estimated total value of proposed improvements when completed: \$ \_\_\_\_\_  
 How do you propose to finance the improvements? \_\_\_\_\_  
 Anticipated start date: \_\_\_\_\_ Anticipated completion date: \_\_\_\_\_  
 Describe proposed improvements and type(s) of construction: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 Attach illustrations showing all dimensions (refer to Improvement Illustrations Required on Page 3 of Application Instructions).

11. Type and number of aircraft which will be operated from the terminal in conjunction with use of the area:

	Under 6,500#	6,500-12,500#	12,500-25,000#	25,000-200,000#	200,000# & over
Fixed Wing Aircraft:					
Rotary Wing Aircraft:					

<p>12. Signature: _____          Print Name: _____          Company Name: _____          Title: _____          Date: _____</p>	<p>13. BEFORE SUBMITTING YOUR APPLICATION, HAVE YOU:</p> <ul style="list-style-type: none"> <li>➤ Enclosed the \$100.00 nonrefundable application fee?</li> <li>➤ Completed and signed the application?</li> <li>➤ Attached required drawings and documents?</li> <li>➤ Provided the proposed method of financing improvements?</li> <li>➤ Provided Alaska Business License or other requested business documentation?</li> </ul>
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**UNSIGNED OR INCOMPLETE APPLICATIONS WILL NOT BE PROCESSED**

**LAND LEASE APPLICATION QUESTIONNAIRE**

**Please complete the following questions and return with application to Airport Leasing.**

1. If incorporated, list incorporation status and officers: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. List name, address, telephone, and fax of the individual(s) authorized to negotiate and execute a lease agreement with the Airport on behalf of the corporation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Explanation of the need to be on the Airport and use of the requested premises including:

A. Statement addressing the business need specific to an Airport location. What percentage of your business is directly related to the airport (i.e. air cargo, aircraft ground support).

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

B. Have locations off the Airport been considered? If yes, briefly explain why they are unsuitable.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

C. Are any off-Airport operations anticipated? If so, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

D. Are the proposed uses related to any current Airport operations? If so, please explain.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

E. List business factors/advantages of an Airport location, including foreign trade zone and tax advantages, if applicable.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

F. Brief description of proposed operations stating relationship to specific requested authorized uses.

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G. Will there be product assembly or repair? If yes, briefly describe.

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H. If warehouse activities are proposed, list the percentage of warehouse activity requiring movement of goods within the following periods:

12 hours \_\_\_\_\_ 48 hours \_\_\_\_\_ 7 days \_\_\_\_\_ longer than 7 days \_\_\_\_\_

4. If proposed development of improvements are phased, describe phasing in terms of function and operations, cost, and time.

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