

City of Cold Lake

COLD LAKE AERODROME SUBTENANT APPLICATION FORM

LESSEE INFORMATION						
Lessee Name:			Application Date:			
Address:		City:		Province:		
Postal Code: Phone #:			Cell/Alternate #:			
Email:						
LEASE PROPERTY INFORMATION						
Aerodrome Address: Legal: SW-29-63-2-W4M; 792 1554 Rural Serviceable Address: 63407 Range Road 425 □ Lot: OR □ Tie Down Lot:						
SUBTENANT INFORMATION						
Subtenant Name:			Application Date:			
Address:		City:		Province:		
Postal Code: Phone #:			Cell/Alternate #:			
Email:						
SUBTENANT AIRCRAFT DESCRIPTION & LENGTH OF LEASE						
Aircraft of Subtenant: ☐ Owned ☐ Authorized User		Length of Subtenant Lease:				
Type of Aircraft:	Aircraft Registration / Call ID/ Tail #:					
Aircraft Length:	Aircraft wingspan:	F		Plug In Required: ☐ Yes ☐ No		
Does the subtenant currently have a lease space at the Aerodrome: ☐ Yes, Lot ☐ No						
SUBTENANT LEASE APPLICATIONS ARE DECIDED WITHIN 15 BUSINESS DAYS						
I/ we hereby declare I/we have reviewed and understand the conditions/terms of the City of Cold Lake Aerodrome Lease Policy 143-OP-12 and Cold Lake Aerodrome User Policy 144-OP-12 and that the use of the aerodrome for the lease area as identified in this application will be conducted in accordance with the policies. I/we further declare that I/we will notify the City of Cold Lake Airport Authority/ Manager of any proposed changes or information changes to this application.						
Date signed: Print name: (Lessee)			Signature of Lessee:			
Date signed: Print name: (Subtenant)				Signature of Subtenant:		

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Checklist of Submission Requirements				
□ Completed and Signed form by both the Lessee and the Subtenant				
Important Notice:				
Subtenant Lease Applications will processed as per the Lease Agreement and as noted in the City of Cold Lake Aerodrome Lease Policy 143-OP-12				
The subtenant has no right to lease or use the property until the 15 business day decision period has expired or the application for a subleasing has been approved by the City. The 15 business day decision period starts from the date of receipt by the City of the completed application form.				

OFFICE USE ONLY					
Date Received:	Received By:	□ Approved □ Rejected			
Approval Date:	Signature of Airport Authority / Manager:				
Date Phoned:	Date: Emailed:	Date Formal Letter Sent:			

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