

## Attachment C – New Airline Information Form

Airline / Service Information			
<b>Corporate Contact:</b>		Title:	
Mailing Address:			
Phone:		Fax:	E-Mail:
Marketing Contact:			
Phone:		Fax:	E-Mail:
Billing Contact:			
Mailing Address:		Title:	
Phone:		Fax:	E-Mail:
LAS Operational Information			
<b>Type of Operations:</b> <small>(Check all that apply)</small>		<input type="checkbox"/> Passenger <input type="checkbox"/> Cargo <input type="checkbox"/> Domestic <input type="checkbox"/> International	
<b>Scheduled Service:</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		Charter Service: <input type="checkbox"/> Yes <input type="checkbox"/> No	
<b>Scheduled No. of Flights:</b> <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Monthly <input type="checkbox"/> Unscheduled			
<b>Day(s) of Week:</b> Su[ <input type="checkbox"/> ]    M[ <input type="checkbox"/> ]    T[ <input type="checkbox"/> ]    W[ <input type="checkbox"/> ]    Th[ <input type="checkbox"/> ]    F[ <input type="checkbox"/> ]    Sa[ <input type="checkbox"/> ]			
<b>Arrive LAS:</b> Time (Local): _____ Origin: _____ Destination: _____ Ferry / Live			
<b>Depart LAS:</b> Time (Local): _____ Origin: _____ Destination: _____ Ferry / Live			
<b>Start Date:</b>		<b>Equipment Type(s):</b>	
<b>Number of Seats per Aircraft Type:</b>			
<b>Reservation System:</b>			
<b>Ticketing Requirements (# of Positions):</b>		<b>Skycap Requirements:</b>	
<b>Location of Operations:</b>			
<b>Office Space Needs (SF):</b>			
<b>Insurance Requirements:</b> Gen. Liability \$150 MIL[ <input type="checkbox"/> ]    Auto \$5 MIL[ <input type="checkbox"/> ] Aircraft Liab. \$150 MIL[ <input type="checkbox"/> ]    Liquor \$10 MIL [ <input type="checkbox"/> ]			
Service Providers*:			
<b>Above Wing:</b>		<b>Below Wing:</b>	
<b>PAX Services:</b>		<b>Fueling:</b>	
<b>Security:</b>		<b>Caterer:</b>	
<b>Wheelchair:</b>		<b>Other:</b>	

\*Note: International airlines must use the authorized Aviation Support Provider(s), as may change from time to time.