

MIAMI-DADE AVIATION DEPARTMENT

Business Retention and Development Division – Permit Section

VENDOR/SUB-TENANT/ASSIGNEE/CONTRACTOR/SUB-CONTRACTOR INFORMATION FORM

Tenant Name: _____

I DECLARE THAT THE INFORMATION PROVIDED BELOW IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE

Printed Name: ______ Date: _____ Signature: ______ Date: _____

Relationship to Tenant:

NAME OF VENDOR/SUB- TENANT/ASSIGNEE/ CONTRACTOR/ SUBCONTRACTOR	FREQUENCY OF SITE VISITS	AMOUNT PAID TO VENDOR	GOODS AND/OR SERVICES PROVIDED BY VENDOR	SPECIFY AIRPORT AND INDICATE AIRSIDE AND/OR LANDSIDE ACCESS	VENDOR CONTACT INFORMATION (Address, E-Mail and Telephone Numbers)