

BEND MUNICIPAL AIRPORT HANGAR RESERVATION APPLICATION

I, _____, request to reserve a position on the City of Bend reservation/waiting list for an aircraft hangar at the Bend Municipal Airport in Bend, Oregon.

Please indicate your preference for the type of hangar you wish to rent:

Hangar Type:	*Current Monthly Rate as of Jan 1, 2008:
___ T-Hangar apprx 1,250 sq. ft., clear door apprx 42' (built 1978, sliding doors) (A & B Hangars)	\$165
___ T-Hangar apprx 1,400 sq. ft., clear door apprx 41'6" (built 1993, sliding doors) (D – H Hangars)	\$225
___ T-Hangar, apprx 1,300 sq. ft., clear door apprx. 41'6" (built 1998, bi-fold doors) (I Hangars)	\$275
___ T-Hangar, apprx 1,300 sq. ft., clear door apprx. 41'6" (built 2002, bi-fold doors) (J Hangars)	\$300
___ No Preference (First Available Hangar)	

A deposit of \$200 must accompany your application. Please return the application, along with a check for your deposit payable to the City of Bend, attention Sue Palmeri, Airport Manager at the address below.

Position on the waiting list is determined by the date your reservation application and deposit are received by the City. Selection as a hangar tenant is based on your standing on the waiting list. When a hangar becomes available, an amount equal to the first month's rent, pro-rated as applicable, will be applied from your deposit and a lease will be forwarded to you for your execution. Failure to execute the lease and return it to the City within 10 business days from mailing will result in the removal of your name from the waiting list, unless otherwise agreed to by City. Any remaining deposit held (less the one month's rent applied) will be refunded to you. Additionally, you may terminate your position on the waiting list at any time and request a full refund of your deposit, less a \$25 administrative fee. The City reserves the right to deviate from the waiting list as required for the good of the Airport.

I have read and understand and agree to the above terms.

Signature: _____ Date: _____

Address: _____

Aircraft Tail Number: _____

day time phone: _____

cell phone: _____ e-mail: _____

Please notify the City of any change in your contact information.

Bend Municipal Airport
PO Box 431
Bend OR 97709
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2/25/2008