

# JFK Millennium Partners’ Application for T6 Local Business Marketplace

John F. Kennedy International Airport - Terminal 6

October 2024

Issued by JFK Millennium Partners, LLC

## Application Form

JFK Millennium Partners has created the T6 Local Business Marketplace to showcase the talent, diversity, and vibrancy of Queens to our passengers. The purpose of the JFK T6 Local Business Marketplace is to create meaningful opportunities for local businesses and Graduates of the PANYNJ Institute of Concessions.

As set forth in the Local Business Marketplace Selection Process Document in which this Application Document is included; in order to participate in this Selection Process, you must complete this Application Document and upload it together with all required documentation in a single PDF or as a single folder of separate files to the email specified in the Marketplace Selection Process Document. You should carefully review the Marketplace Selection Process Document, and the other instructions set forth therein on the procedures for completing this Application Document. Capitalized terms used but not defined herein shall have the meanings set forth in the Selection Process Document.

### 1. Company Information

<b>Name of Company (Full Legal Name):</b>	
<b>Business or Operating Name:</b>	
<b>Eligibility Validation 1:</b> <i>Are you a Tier 1 or Tier 2 Local Business Enterprise (“LBE”) or Institute of Concessions Graduate (please indicate)</i>	
<b>Eligibility Validation 2:</b> <i>Has your business been in operation for at least 3 years?</i>	

<b>Business Street Address:</b>	
<b>Mailing Address (if different):</b>	
<b>Address for Delivery of Legal Notices (if different):</b>	
<b>Primary Contact Name:</b>	
<b>Position:</b>	
<b>Telephone:</b>	
<b>Email:</b>	

**2. Key Personnel:**

2.1. Provide the names and titles and a brief biography of key personnel (Chief Executive Officer and Chief Financial Officer or equivalents, Members of Board of Directors or equivalent governing body, or any other key personnel you wish to identify for JMP) and/or shareholders owning more than 25% of the voting and/or economic interest in the Company:

Name	Brief Biography



- 2.2. Please attach one or more organizational charts of the Company that identify (i) ownership structure of the Company – including the holders of voting and/or economic interests in the Company (and the percentage thereof) and (ii) the position of the key personnel identified in Question 2.1 within the Company, with your submission of this form.

**3. Company Details**

- 3.1. Describe your company structure and formation:

<b>Company Type (Corp, LLC, etc.):</b>	
<b>Ownership Type (Private, Public, etc.):</b>	
<b>Year of Formation:</b>	
<b>Jurisdiction Where Formed:</b>	
<b>Address of Registered Office in New York State (if any):</b>	
<b>Business Federal Tax ID or Individual's Social Security Number:</b>	
<b>Are you a graduate of Port Authority of New York and New Jersey's Institute of Concessions Program? (If yes, please indicate year of graduation)</b>	



3.2. Provide additional information:

<b>Number of years in operation?</b>	
<b>Describe any change of ownership of the Company during the last 5 years?</b>	
<b>Describe any change of name or licence number during the last 5 years?</b>	
<b>Describe authority to operate in New York State.</b>	
<b>Has Company been the subject of a bankruptcy proceedings or other insolvency proceedings in the past 10 years? Have any key personnel of the Company (as identified in Question 2.1) been the subject of such a proceeding or served as an officer or director of a company that has been the subject of such a proceeding in the past 10 years? If yes to any of the above, please provide details.</b>	
<b>Has Company been the defendant in any proceedings involving fraud, tax evasion or any other financial crime or deception? Have any key personnel of the Company (as identified in Question 2.1) been the defendant in such a proceeding or served as an officer or director of a company that has been the defendant in such a proceeding in the past 10 years? If yes to any of the above, please provide details.</b>	



**4. ACDBE, LBE and/or IOC Graduate Certifications**

Describe all applicable certifications of the Respondent and, if the Respondent is not ACDBE/LBE or and IOC Graduate its shareholders. If Respondent (or shareholders) are in the process of certification, please indicate in the Comments.

Entity Name	Certified Since	Certified By	Percentage ACDBE Participation	Comments

**5. Qualifications and Experience**

Please summarize retail experience below for Applicant, shareholders, and key operational employees:

Name / DBA	Location	Length of Experience (Years)	Sales Volume	Description of experience (include title, and ownership interest)



**6. Disclosure of Current Relationships**

In the tables below, disclose any current relationships with JMP or other tenants at Existing JFK Terminal 7, including:

- 6.1. All current arrangements with (1) JMP, Vantage Group, American Triple I, RXR Realty or Jet Blue (or any affiliate of the foregoing), (2) any entities currently, or to your knowledge are expected to, operate in Terminal 7 at JFK Airport and (3) other terminal operators at JFK Airport,
- 6.2. All current and past relationships with the Port Authority as well as contracts or leases held at any Port Authority facilities, and
- 6.3. Any relationships or current arrangements which may constitute a real or perceived conflict of interest in this Selection Process.

<b>Institution/Company:</b>	
<b>Name and Title of Primary Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Start / finish dates of Relationship:</b>	
<b>Description of Relationship:</b>	

<b>Institution/Company:</b>	
<b>Name and Title of Primary Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Start / finish dates of Relationship:</b>	
<b>Description of Relationship:</b>	

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<b>Institution/Company:</b>	
<b>Name and Title of Primary Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	
<b>Start / finish dates of Relationship:</b>	
<b>Description of Relationship:</b>	

**7. Disclosure of Current Franchise, License and/or Similar Arrangements**

Demonstrate accreditation where applicable. Please include any supporting documentation:

Franchisor / Licensor	Date Entered	Exclusivity / Territory	Describe Key Terms / Rights / Limitations

**8. Company Financial Information**

8.1. List annual revenue and net operating income by year, as applicable:

	Annual Revenue		Net Income	
	Total	In NY and NJ	Total	In NY and NJ
2019				
2020				
2021				
2022				
2023				



- 8.2. Attach most recent Annual Report for the company, if available.
  
- 8.3. Attach most recent audited financial statements or current financial statements with a certification of CFO or CEO for a period ending within 90 days of the date of this Response Submission Form. Provide description below of financial statements that have been provided.

- 8.4. If available, attach a current credit rating report from a credit agency, including Moody's, Standard and Poor's, Fitch, or Dun & Bradstreet. Provide description below of any such credit rating report that has been provided.

**9. Financial References**

Please provide the below financial references as applicable and inform them that you have allowed JMP to contact them and request information.

- 9.1. Bank:

<b>Institution/Company:</b>	
<b>Name and Title of Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	





9.2. Accredited Credit Rating Agency

<b>Institution/Company:</b>	
<b>Name and Title of Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	

9.3. Accounting or Other Financial Services

<b>Institution/Company:</b>	
<b>Name and Title of Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	

9.4. Professional Affiliations (Airport Minority Advisory Council, National Restaurant Association, Chamber of Commerce, etc.)

<b>Institution/Company:</b>	
<b>Name and Title of Contact:</b>	
<b>Phone:</b>	
<b>Email:</b>	

**APPLICATION END**

