



2026 BUSINESS LICENSE APPLICATION

Business Information

| | |
|--------------------|--|
| Name of Business: | |
| Business Address: | |
| Business Phone: | |
| Secondary Address: | |
| Cellular Phone: | |
| Email: | |
| Website: | |

Key Personnel

| | |
|-------------|--|
| Name/Title: | |
| Name/Title: | |
| Name/Title: | |
| Name/Title: | |

Certificates & Licenses

| | |
|--------------|--|
| Type/Number: | |
| Type/Number: | |
| Type/Number: | |
| Type/Number: | |

Aircraft (if applicable)

| Make: | Model: | N#: |
|-------|--------|-----|
| | | |
| | | |
| | | |

Please describe your business, key elements that are aviation-related, and that will be vital in meeting our Minimum Standards requirements for based businesses. _____

The annual fee of \$500.00 covers one or more aeronautical activities at the Colorado Air and Space Port for which an applicant meets all requirements as stated in the “Minimum Standards for Airport Users” including evidence of current insurance. A late fee of \$100 per month or a fraction of a month will be assessed for businesses that do not renew their business license by the first day of January of each year.

The applicant/s hereby acknowledges that they have read the “Minimum Standards for Airport Users” as adopted by Colorado Air and Space Port/ Adams County are in full compliance and have provided the necessary certificates of insurance.

Insurance Certificate on file expires _____.

Please sign here:

By _____ Title _____ Date _____

By _____ Title _____ Date _____

Please attach your check for \$500.00, payable to Colorado Air and Space Port along with the completed application and proof of insurance to:

Colorado Air and Space Port ATTN:
Laura Hansen
Business Support Specialist
5200 Front Range Parkway
Watkins, CO 80137-7131