



SUBLESSOR

L-SL
(01/2018)

1. Trade Name of Location
2. Indicate if you are: <input type="checkbox"/> Sublessor <input type="checkbox"/> Concessionaire <input type="checkbox"/> Management Company of Permittee
3. Business Entity Name for Sublessor, Concessionaire or Management Company
4. Federal Employer Identification Number (FEIN) for Sublessor, Concessionaire or Management Company

COMPLETE THE FOLLOWING:

SSN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)
Full Legal Name of Individual, Partner, Officer (Last, First, Middle)		Title/Owner
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IF YOU NEED MORE SPACE USE ADDITIONAL COPIES OF THIS PAGE