

## Broward County Aviation Department 320 Terminal Drive, Suite 200 Fort Lauderdale, FL 33315

## Tenant Improvement Project (TIP) Application

		ibioveiii	eni Fiojet	t (TIP) Applicat		<u> </u>
	tenant must complete and s de to Airport premises.	ubmit this	TIP Applica	ation to the Browar	d County Aviat	tion Department before any
Date					Contact	
Tenant Name					Phone	
Address					E-mail	
City			State		Zip Code	
Subtenant Project?		Yes	No			
	the primary tenant authorizing t			t be attached.		
Subtenant					Contact	
Address					Phone	
City			State		Zip Code	
Project Type - Che	ck All That Apply:					
New Construct	tion					proposed project.
Renovation	(Attach plans, specifications or other available project information.)					
Demolition						
Relocation						
Other:						
Project Address						
and/or neighboring	cts to the project site spaces.					
Estimated Construc	ction Cost					
Estimated Start Da	te					
Estimated Construc	ction Duration					
Please complete the	following as applicable.					
A/E Designer						
Address						
Contact Name						
Phone No.				Email		
Contractor						
Address						
Contact Name						
Phone No.				Email		
NOTE: Final as-built	plans must be submitted & r	must com	ply with curr	ent BCAD Electron	ic Media Subn	nittal requirements.
For BCAD Use Only Check applicable review type.						
	Fast Track Review			TIP No.:		
	Regular Conceptual Technical Review			Reviewed by:		
				Phone No.:		
	Emergency			Email:		