



LETTER OF INTENT

Name of Concession: _____

Name of Concessionaire: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Name of ACDBE Firm: _____

Address: _____

City: _____ State: _____ Zip: _____

Telephone: _____ Email: _____

Legal arrangement with ACDBE firm:

Subcontract
 Joint Venture
 Other: _____

Description of work to be performed or location(s) to be operated by ACDBE firm:

The Concessionaire is committed to utilizing the above named ACDBE for the work described above.

The estimated percentage of this work is _____ % of total contract sales volume.

AFFIRMATION

The above-named ACDBE firm affirms that it will perform the portion of the contract for the estimated dollar value as stated above.

By: _____

Concessionaire Signature	Title	Date

By: _____

ACDBE Signature	Title	Date

For Questions: Please email DEN-ACDBE@flydenver.com



DENVER INTERNATIONAL

8500 Peña Blvd. | Denver, Colorado 80249-6340 | (303) 342-2000

