



LETTER OF INTENT (LOI)

CONCESSION OPPORTUNITY

RFP Number	Solicitation Name

JOINT VENTURE INFORMATION

Joint Venture Firm:	
Address:	
City, State and Zip:	
Phone:	
Email:	

ACDBE FIRM INFORMATION

ACDBE Firm:	
Address:	
City, State and Zip:	
Phone:	
Email:	
Legal Arrangement:	<input type="checkbox"/> Sub Lease <input type="checkbox"/> Joint Venture <input type="checkbox"/> Other

List all NAICS codes certified with the City & County of Denver:

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:	<input type="text"/>	<input type="text"/>	<input type="text"/>
	Concessionaire/Joint Venture Signature	Title	Date
By:	<input type="text"/>	<input type="text"/>	<input type="text"/>
	ACDBE Owner Signature	Title	Date