



**CARSON CITY AIRPORT
CLASS II-V FBO BUSINESS APPLICATION**

Name of Business: CARSON AVIATION SERVICES LLC

Description of Business: AIRCRAFT MAINTENANCE

Name of Applicant: BETTY CREEKS

Owners/Partners: _____

Address: 2640 COLLEGE PKWY

City: CARSON CITY State: NV Zip: 89706

phone (775) 841-0400

email bcreeks@carson-aviation.com

Location of business on Airport: 2640 COLLEGE PKWY

Previous Location of business: N/A

Activities to be conducted (describe all aviation and non-aviation) and how space on airport will be used: MAINTENANCE AND REPAIR OF GENERAL AVIATION AIRCRAFT INSTALLATION AND MAINTENANCE OF AVIONICS.

Explanation of safety measures, (i.e. why is this not a hazard to the airport and affected community): WE MAINTAIN AN INTERNAL RISK MANAGEMENT POLICY TO REDUCE AND ELIMINATE RISK TO THE AIRPORT AND OUR FACILITIES

Attached hereto is:

- 1- A financial statement
- 2- Estimated expenses and income for the first 6 months of operations
- 3- Copies of all FAA or other governmental certifications or licenses needed to undertake the business (other than Carson City business license)

BC (initial) I have received and reviewed Title 19 of the Carson City Municipal Code and agree to comply with the terms thereof. (Title 19 can be obtained on the web-site www.carsoncity-airport.com)

DC (initial) I am aware that there is a Class II FBO fee of \$1200 per year (or a percentage of revenues, if selected) and I agree to pay the same.

BC (initial) I am aware that there is an insurance requirement and I agree to maintain it in force.

DC (initial) I have not been convicted of a felony.

Additional Information or Remarks from Applicant supporting the Application: _____

Signature of Applicant _____

Date: 8/16/2016

Approved: _____
Carson City Airport Authority

Date: _____

Carson Aviation Services
Profit & Loss
August 4 through September 12, 2016

	Aug 4 - Sep 12, 16
Ordinary Income/Expense	
Income	
Sales	12,677.21
Services	44,742.71
Total Income	57,419.92
Cost of Goods Sold	
Cost of Goods Sold	1,098.30
Total COGS	1,098.30
Gross Profit	56,321.62
Expense	
oil	-180.70
Parts	2,296.31
shipping	92.43
Total Expense	2,208.04
Net Ordinary Income	54,113.58
Other Income/Expense	
Other Expense	
Other Expenses	300.00
Total Other Expense	300.00
Net Other Income	-300.00
Net Income	<u>53,813.58</u>



P.O. Box 1800
Saint Paul, Minnesota 55101-0800

3750 TRN

X ST01

Uni-Statement

Account Number: [REDACTED]

Statement Period:

Aug 5, 2016
through
Sep 7, 2016

Page 1 of 5

[REDACTED]

BELLY CREEKS

1380 JUDY ST
MINDEN NV 89423-9276



To Contact U.S. Bank

By Phone:

1-800-US BANKS
(1-800-872-2657)

Telecommunications Device
for the Deaf:

1-800-685-5065

Internet:

usbank.com

U.S. BANK PLATINUM CHECKING

U.S. Bank National Association

Account Number [REDACTED]

Account Summary

Beginning Balance on Aug 5	\$	60,002.60	Number of Days in Statement Period	34
Deposits / Credits		6,272.82	Customer Segment	Military
Card Withdrawals		1,327.30-		
Other Withdrawals		3,107.71-		
Checks Paid		459.09-		
Ending Balance on Sep 7, 2016	\$	61,381.32		

Overdraft Protection

The following account(s) are linked to your checking account for Overdraft Protection. The account(s) are listed in the order that they would be used to transfer funds to your checking account if the available account balance is negative. If you wish to make changes to your Overdraft Protection account order, log in to your account at usbank.com, visit your local U.S. Bank branch or call U.S. Bank 24-Hour Banking at the number listed above.

1st Position: U.S. Bank Platinum Select Money Market Savings account ending in [REDACTED]

2nd Position: U.S. Bank Platinum Select Money Market Savings account ending in [REDACTED]

Deposits / Credits

Date	Description of Transaction	Ref Number	Amount
Aug 5	Electronic Deposit	[REDACTED]	\$ 1,412.33
Aug 15	Deposit	[REDACTED]	45.00
Aug 19	Deposit	[REDACTED]	70.00
Aug 19	[REDACTED]	[REDACTED]	897.14
Aug 19	Electronic Deposit	[REDACTED]	1,369.64
Sep 2	Electronic Deposit	[REDACTED]	951.32
Sep 2	Electronic Deposit	[REDACTED]	1,446.36
Sep 6	Deposit	[REDACTED]	81.03
Total Deposits / Credits			\$ 6,272.82

Card Withdrawals

Date	Description of Transaction	Ref Number	Amount
Aug 8	Debit Purchase - VISA	On 080516 CARSON CITY NV	\$ 8.07-
Aug 8	Debit Purchase - VISA	On 080516 MINDEN NV	13.84-
Aug 10	Debit Purchase	COSTCO WARE #012 CARSON CITY NV	22.48-
Aug 10	Debit Purchase - VISA	On 080916 CARSON CITY NV	26.07-

CARSON AVIATION SERVICES, LLC

GENERAL LEDGER

PROJECTED STATEMENT

Beginning Balance on 08/08/2016	53,282.41
Ending Balance on 09/07/2016	88,677.86

Gross Revenue	528,000.00	Approximately for the next six months
Payroll	114,000.00	
Rent	21,000.00	
Insurance	5,500.00	
Parts & Supplies	<u>120,000.00</u>	
Net Revenue	268,000.00	
Average Monthly Ledger Balance	<u>44,670.00</u>	

CARSON AVIATION SERVICES
ASSET LISTING

ITEM	AMOUNT	VALUE
ATP Microfishe		1 \$20,000.00
Band Saw		1 \$250.00
Bead Blaster		1 \$300.00
Carts		13 \$1,800.00
Chargers, Testors		4 \$5,000.00
Drill Press		1 \$250.00
Electric Tow Vehicle		1 \$2,000.00
Engine Hoists		2 \$500.00
Forklift		1 \$2,500.00
Gas Tow Tug		1 \$4,500.00
Grinders		2 \$200.00
Hydraulic Press		1 \$500.00
Hydraulic Pump		1 \$1,000.00
Jacks, Aircraft		9 \$6,000.00
Jacks, Floor		2 \$250.00
Ladders and stands		10 \$2,000.00
Metal press & Cutter		1 \$500.00
Metal Punch		1 \$1,000.00
O2 Cart		1 \$2,000.00
Office Equipment	Multi	\$6,000.00
Parts bins	Multi	\$500.00
Parts Washer		1 \$500.00
Scales, A/C		3 \$3,800.00
Sheet metal cart and t		1 \$4,000.00
Throatless Shear		1 \$500.00
Tools A/C Specific	Multi	\$1,500.00
Tools, Assorted	Multi	\$30,000.00
Torque Adaptors	Multi	\$500.00
Torque Wrnches		7 \$2,000.00
Towbars	Multi	\$1,000.00
Vacuums		3 \$150.00
Welder, Gas		1 \$1,000.00
Welder, Mig		1 \$1,500.00
Welder, Stick		1 \$1,500.00
		\$105,000.00



CN-OH-W5-DL
 P.O. Box 5265
 Cincinnati, OH 45201-5265

July 12, 2016

REF: 20161916150734

000006973 01 MB 0.419 106481587812044 P

Betty Creeks
 1380 Judy St
 Minden, NV 89423-9276

U.S. Bank National Association

Your Credit Score and the Price you Pay for Credit

Your Credit Score

Your Credit Score	610	Date: 7/9/2016
Source:	Experian P.O. Box 2002 Allen, TX 75013-2002 888-397-3742 http://www.experian.com/reportaccess	

Understanding Your Credit Score

What you should know about credit scores	Your credit score is a number that reflects the information in your credit report. Your credit report is a record of your credit history. It includes information about whether you pay your bills on time and how much you owe to creditors. Your credit score can change, depending on how your credit history changes.
How we use your credit score	Your credit score can affect whether you can get a loan and how much you will have to pay for that loan.
The range of scores.	Scores range from a low of <u>325</u> to a high of <u>850</u> . Generally, the higher your score, the more likely you are to be offered better credit terms.
How your score compares to the scores of other consumers	Your credit score ranks higher than <u>24</u> percent of U.S. consumers.
Key factors that adversely affected your credit score	<ul style="list-style-type: none"> - Derogatory public record or collection filed - Length of time since legal item filed or collection item reported - Proportion of bal to high credit on bank rev or all revolving accounts - Length of time accounts have been established - Number of recent inquiries on consumer report

Originator Name: Erica Carol Perneau
 Originator ID: 000000605040

EQUAL CREDIT OPPORTUNITY ACT NOTICE

The Federal Equal Credit Opportunity Act prohibits creditors from discriminating against credit applicants on the basis of race, color, religion, national origin, sex, marital status, age (provided the applicant has the capacity to enter into a binding contract); because all or part of the applicant's income derives from any public assistance program; or because the applicant has in good faith exercised any right under the Consumer Credit Protection Act. The Federal agency that administers compliance with this law concerning this creditor is the Bureau of Consumer Financial Protection, 1700 G Street NW, Washington DC 20006.

Notice to Washington residents: Washington state law against discrimination prohibits discrimination in credit transactions because of race, creed, color, national origin, sex, marital status, honorably discharged veteran or military status, sexual orientation, or the presence of any sensory, mental or physical disability or the use of a trained guide dog or service dog by a disabled person. The Washington State Human Rights Commission administers compliance with this law.



UNITED STATES OF AMERICA
DEPARTMENT OF TRANSPORTATION
FEDERAL AVIATION ADMINISTRATION

INSPECTION AUTHORIZATION

This certifies that Troy Marvin Creeks
holder of Mechanic Certificate No. 3674511
has been authorized to exercise the privileges of Federal
Aviation Regulation 65.95.
This authority expires March 31, _____ unless
sooner revoked by the Administrator of the Federal Aviation
Administration or extended by endorsement on the reverse of
this card.

DATE ISSUED 07/18/2016	SIGNATURE OF STDS. INSPECTOR <i>[Signature]</i> Df Morgan
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FAA FORM 8310-5 (8-80) SUPERSEDES PREVIOUS EDITION

SIGNATURE OF AUTHORIZED MECHANIC
[Signature]



CERTIFICATE OF AVIATION LIABILITY INSURANCE

DATE(MMDDYYYY)
08/24/2016

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Glennon W. Travers d.b.a. Travers & Associates P.O. Box 220519 Saint Louis, MO 63122	CONTACT NAME		
	PHONE (A/C, No, Ext)	FAX (A/C, No)	
E-MAIL ADDRESS			
PRODUCER CUSTOMER ID No:			
INSURED Carson Aviation Services LLC 2640 College Pkwy Carson City, NV 89706	INSURER(S) AFFORDING COVERAGE	%	NAIC No.
	INSURER A: U.S. SPECIALTY INSURANCE COMPANY	100%	
	INSURER B:		
	INSURER C:		
	INSURER D:		
	INSURER E:		
	INSURER F:		

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

AIRPORT & FBO LIABILITY COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

INSURER LETTER	POLICY NUMBER	EFFECTIVE DATE	EXPIRATION DATE	ADDITIONAL INSURED?(Y/N)	SUBROGATION WAIVED?(Y/N)	
	AP2000423-00	08/26/2016	08/26/2017	Y	N	
COVERAGE	OPTIONS	LIMIT	APPLIES TO	LIMIT	APPLIES TO	
PREMISIS LIABILITY		\$ 2,000,000	BI EA PER	\$	PD	
		\$ 2,000,000	EA OCC	\$ 4,000,000	AGGR	
PREMISES MEDICAL PAYMENT		\$ 1,000	EA PER	\$ 5,000	EA OCC	
PRODUCTS LIABILITY		\$ 100,000	BI EA PER	\$ 1,000,000	AGGR	
	EXTENDED	\$ 1,000,000	EA OCC			
COMPLETED OPERATIONS LIABILITY		\$ 100,000	BI EA PER	\$ 1,000,000	AGGR	
	EXTENDED	\$ 1,000,000	EA OCC			
HANGERKEEPERS LEGAL LIABILITY	INCLUDING TAXI					
	IN FLIGHT	\$ 250,000	EA AIRCRAFT	\$ 250,000	EA OCC	
		\$				
		\$	EA OCC	\$	AGGR	
		\$	EA OCC	\$	AGGR	
	INCLUDED		EXCLUDED			
COVERAGE	DESCRIPTION	OPTIONS	LIMIT	APPLIES TO	LIMIT	APPLIES TO
			\$		\$	

DESCRIPTION OF OPERATIONS / REMARKS (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
CARSON, CARSON CITY, NV
Certificate Holder is included as an Additional Insured.

CERTIFICATE HOLDER Carson City Airport Authority 2600 College Parkway Carson City, NV 89706	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
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