



TRUST LANDS ADMINISTRATION

SUPPORTING UTAH SCHOOLS AND INSTITUTIONS

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trustlands.utah.gov

Date: _____

LEASE APPLICATION SUPPLEMENTAL INFORMATION

Name: _____

Address: _____

City: _____

State: _____ Zip Code: _____ Phone: _____

Requested Lease Term: _____ **Years**

Intended Use of the property:

Please list or provide a schedule describing when any required improvements will be constructed or developed:

Please describe your experience in performing similar or related activities:

Please list your expected costs/expenses to fully develop the property:

Please outline your anticipated revenues/return to Trust Lands Administration:

Please outline your ability to perform on this lease (financial ability, technical or professional experience, etc.):