

## ONE YEAR FINANCIAL HARDSHIP WAIVER APPLICATION

EXEMPTION THAT REQUIRES OFFICE OF CONTRACT COMPLIANCE (OCC) APPROVAL



This application for the Airport Concessionaires Living Wage Ordinance (LWO) Waiver must be submitted along with supporting documents to: <a href="mailto:bca.eeoe@lacity.org">bca.eeoe@lacity.org</a>; or Office of Contract Compliance (OCC), 1149 S. Broadway, Suite 300, Los Angeles, CA 90015.

## **INACCURATE OR INCOMPLETE SUBMISSIONS WILL BE RETURNED.**

Section 10.37.15 of Article 11, Chapter 1, Division 10 of the Los Angeles Administrative Code to read as (1) Airport Concessionaires subject to a lease agreement at Los Angeles International Airport that is in effect at the time of the passage of the ordinance and who have **less than 50 employees at LAX** may apply for a one-year hardship waiver from the requirements of this article. (2) The DAA shall grant a waiver from the requirements of this article to any Airport Concessionaire who demonstrates that compliance with the LWO will result in bankruptcy or a shutdown of their enterprise, reduction in their workforce by more than 20 percent or curtail its employees' total hours by more than 30 percent. The DAA shall grant such a hardship waiver only after reviewing the Airport Concessionaire's financial condition at their expense. A waiver granted under this section shall be valid for no more than one year.

The LW-30 waiver for an Airport Concessionaires in financial hardship DOES NOT exempt an Airport Concessionaire from complying with other applicable federal, state, or local laws and regulations. Prior to submitting a waiver application, an Airport Concessionaire must provide written notice of the waiver application to all Airport Employees employed by the Airport Concessionaire and within three (3) days of receiving a waiver determination from the OCC, the Employer must provide written notice of the determination to their Employees.

SECTION I. AIRPORT EMPLOYER INFORMATION	
1. Company Name:	
2. Operating Name or Doing Business As:	
3. Company Address:	
4. Phone Number: 5. Email Address:	
SECTION II. EXEMPTION ELIGIBILITY CRITERIA	
6. Please identify one of the following qualifying hardships (choose at least one to be eligible for this waiver):	
$\ \square$ Must reduce workforce by more than 20% to avoid bankruptcy or terminate the contract	
☐ Must curtail Airport Employees total hours by more than 30% to avoid bankruptcy or termination of Contract	
7. Provide a cover letter describing your reasons for eligibility, in addition to relevant financial statements and documents that have been prepared in accordance with Generally Accepted Accounting Principles (GAAP), including but not limited to Profit and Loss Statement, Balance Sheet, Cash-Flow Statement, as well as all other applicable documents to support your claim of financial hardship. Documentation should demonstrate the projected cost of compliance with the LWO and the Airport Employer's inability to absorb this cost without resulting in the situation indicated in Question 6.	
SECTION III. SIGNATURE	
I declare under penalty of perjury under the laws of the State of California that: (1) I am authorized to bind the entity listed above; and (2) the information provided on this form is true and correct to the best of my knowledge.	
Print Name of Person Completing This Form Title Contact Phone	Number
Signature Date	
OCC USE ONLY:	
☐ Approved / ☐ Not Approved – Reason:	
By Analyst: Date:	