

APPLICATION FOR FRANCHISE
COCHISE COUNTY, ARIZONA



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JUN 16 2022 4:08 PM

Applicant's Name *Holiday Enterprises Inc*

Address: *PO Box 309*

City: *Tombstone*

State: *AZ*

Zip: *85638*

Telephone: *520-457-8700*

Emergency Telephone: *same*

Who will own and operate the system, if other than applicant:

Name *RW & Andrea Wood*

Address: *PO Box 309*

City: *Tombstone*

State: *AZ*

Zip: *85638*

Telephone: *520-457-8700*

Emergency Telephone: *same*

Indicate the type of franchise you are applying for:

Cable TV Electricity Gas Sewer Water

Telecommunications Fiber Optic

Note: If you are claiming an exemption from obtaining a franchise please specify reason:

Does the applicant have an existing or proposed agreement with anyone proposing to have an ownership interest in the franchise? Yes No

If the answer is yes, please attach a statement from Corporate Council setting forth the name(s) and address(es) of the person(s) with such ownership interest, and a copy of the agreement.

What is the applicant's experience in providing service for the utility for which applicant is applying for a franchise?

We have been in this business since the 80's.

How many people do you anticipate serving with this utility?

175-180

NOTE: This Application must be accompanied by a \$500 nonrefundable Franchise Application Fee and a legal description of the boundary of the area to be served by the Franchise.

For legal description - Holiday Ranch Estates, please see previous as nothing has changed. - Andrea Wood, Vice-President