

Commercial Tenancy Application

To Lease Commercial & Retail Premises



Please be advised that this application will only be processed once ALL details have been completed and all copies of supporting documents are attached.

| | |
|-------------------|-------|
| Property Address: | Date: |
|-------------------|-------|

| |
|----------------------------|
| Name of Proposed Tenant/s: |
|----------------------------|

If Proposed Tenant is a Company:

| | | |
|-------|-------|--|
| A.C.N | A.B.N | GST Registered: Yes <input type="checkbox"/> No <input type="checkbox"/> |
|-------|-------|--|

| |
|---------------------|
| Registered Address: |
|---------------------|

| | |
|-----------------|----------------------|
| Contact Person: | Position in Company: |
|-----------------|----------------------|

| |
|---------------------------|
| Current Business Address: |
|---------------------------|

| | |
|---|---------------|
| How long have you been at this address: | Current Rent: |
|---|---------------|

| | | |
|--------|---------|------|
| Phone: | Mobile: | Fax: |
|--------|---------|------|

| |
|--------|
| Email: |
|--------|

| | |
|------------------------|--------------------------------|
| Current Landlord/Agent | Landlord/Agent Contact Number: |
|------------------------|--------------------------------|

| | |
|----------|---------|
| Bankers: | Branch: |
|----------|---------|

Personal Guarantors

Applicant/Director 1

| |
|------------|
| Full Name: |
|------------|

| |
|----------------------|
| Residential Address: |
|----------------------|

| | | |
|----------|----------|---------|
| Home Ph: | Work Ph: | Mobile: |
|----------|----------|---------|

| | |
|----------------|--------------------|
| Email Address: | Driver Licence No: |
|----------------|--------------------|

| | |
|--|------------------------|
| Do you own your own home? Yes <input type="checkbox"/> No <input type="checkbox"/> | If No, Landlord/Agent: |
|--|------------------------|

| | |
|---------------|-----------------|
| Contact Name: | Contact Number: |
|---------------|-----------------|

Applicant/Director 2

| |
|------------|
| Full Name: |
|------------|

| |
|----------------------|
| Residential Address: |
|----------------------|

| | | |
|----------|----------|---------|
| Home Ph: | Work Ph: | Mobile: |
|----------|----------|---------|

| | |
|----------------|--------------------|
| Email Address: | Driver Licence No: |
|----------------|--------------------|

| | |
|--|------------------------|
| Do you own your own home? Yes <input type="checkbox"/> No <input type="checkbox"/> | If No, Landlord/Agent: |
|--|------------------------|

| | |
|---------------|-----------------|
| Contact Name: | Contact Number: |
|---------------|-----------------|

If Proposed Tenant is Not a Company

| | | |
|--|-----------------------------|---------------------|
| Full Name: | | |
| Residential Address: | | |
| Home Ph: | Work Ph: | Mobile: |
| Email Address: | | Drivers Licence No: |
| Do you own your own home? Yes <input type="checkbox"/> No <input type="checkbox"/> | If no, Landlord/Agent Name: | |
| Contact Name: | Contact Number: | |

Proposed Lease Details

| | | |
|---|-----------------|-----------------------|
| Description of Business: | | |
| Proposed Use: | | |
| Term of Lease: | Options: | Proposed Annual Rent: |
| Proposed Commencement Date: | | |
| Security Deposit: | Rent Reviews: | |
| Proposed Works to be Carried Out By Tenant: | | |
| Other Comments: | | |
| Accountant: | | |
| Contact Name: | Contact Number: | |
| Solicitor: | | |
| Contact Name: | Contact Number: | |

Business Trade References *(written preferred, please attach)*

| | |
|-------|-------------|
| Name: | Contact No: |
| Name: | Contact No: |
| Name: | Contact No: |

Experience

Please provide us with details of your current and past retail and business experience – if insufficient space, provide a separate business plan

| |
|--------------------------|
| Retail Experience |
|--------------------------|

| |
|--|
| Business/Management Experience: |
|--|

| |
|--------------------------------|
| Other Relevant Details: |
|--------------------------------|

Asset & Liability Schedule

| ASSETS | APP 1 (\$) | APP 2 (\$) | LIABILITIES | APP 1 (\$) | APP 2 (\$) |
|--------------|------------|------------|-------------------|------------|------------|
| Cash at Bank | | | Bank Over Draft | | |
| Debtors | | | Creditors | | |
| Other | | | Other | | |
| Total | | | Total | | |
| Real Estate | | | Mortgages | | |
| 1. | | | 1. | | |
| 2. | | | 2. | | |
| 3. | | | 3. | | |
| 4. | | | 4. | | |
| Vehicles | | | Vehicles | | |
| 1. | | | 1. | | |
| 2. | | | 2. | | |
| 3. | | | 3. | | |
| 4. | | | 4. | | |
| Other Assets | | | Other Loans | | |
| Shares | | | | | |
| Furniture | | | | | |
| Total Assets | | | Total Liabilities | | |

| | |
|---------------------------------|-------------------------------|
| Combined Gross Worth: \$ | Combined Nett Worth \$ |
|---------------------------------|-------------------------------|

I/we hereby certify that the above statement is true and correct and that all of the Assets and Liabilities listed above are owned personally by me/us.

Signed: _____ Date: _____

Signed: _____ Date: _____

Tenancy Application Checklist

To assist you wish your tenancy application we provide the following, which details the documents you need to include with your application. Your application **CANNOT** be processed unless all documents are provided.

To prevent any inconvenience to you, please check off the items and ensure you have all documents attached to your application.

Identification

Provide a copy of **ONE** (1) form of photo identification:

- Current Driver's Licence, OR
- Current Passport or Visa (if applicable)
- Proof of Age Card

Provide copies of **TWO** (2) forms of other identification:

- Birth Certificate
- Medicare Card
- Health Care Card
- Pension Card

Provide copies of **TWO** (2) documents showing your name and address, for example:

- Motor Vehicle Registration
- Electricity or Gas Account
- Water Account
- Telephone Account
- Tax Assessment Notice



Privacy Protection Of Information *Privacy Act 1988*

Authority to Theo Poulos Real Estate, authority that credit information may be given:

To aid in the application assessment process for commercial, retail and industrial premises, I authorise you to obtain information about my credit worthiness and financial position.

These reports may contain:

- Personal information about me in relation to my application for premises.
- Information about my commercial activities in relation to my application for premises.
- Other information in relation to my commercial credit activities.

I understand the information may be used for the following purposes:

- To assess an application by me for the lease of a premises.
- To assess my credit worthiness and financial position.

Bankers View

I authorise you to receive bankers' opinion about my business, trade and profession.

Authority for Trade References

I authorise you to receive trade references for any purpose relating to an application for commercial or industrial premises. I authorise you to obtain from my accountant a statement of assets and liabilities.

The applicant acknowledges that no binding lease or agreement to lease shall arise until such time as formal lease documentation has been prepared and executed by both parties.

| | | |
|-------|------------|-------|
| Name: | Signature: | Date: |
| Name: | Signature: | Date: |
| Name: | Signature: | Date: |