THE PARADE SHOPPING CENTRE

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LEASEHOLD PREMISES APPLICATION FORM: PLEASE COMPLETE IN BLOCK CAPITALS

PREMISES INFORMATION:		
Area / Unit required:	_ Date required	from
Required Use:		
BUSINESS INFORMATION:		
sole trader □ partnership □ limited company □	Reg. No:	Years trading
Business Name:		
Business Address:		
		Post Code:
Phone: Fax:	Email:	
Name & address of current Landlord:		
	_ Post Code:	Phone:
Trading references:		
1. Name:	2. Name:	
Address:	_ Address:	
Phone:	Phone:	
PERSONAL INFORMATION: To be provided by each person who will be named on the lease		
Mr □ Mrs □ Ms □ Surname:	Forenames:	
DoB: Address:		
		_Post Code:
Home phone No:	Mobile:	
Home owner ☐ rented ☐ other ☐ specify:		
Name & address of landlord if rented:		
Previous address, if at current address for less than 3		
Details of any county court judgement registered against you (state "none" if not applicable).		
I hereby certify that the above information is true.		
Signed:	Date:	