

LEASING PROPOSAL FORM

PROPERTY ADDRESS:			
TENANT NAME:	ABN:		
ADDRESS:	CONTACT:		
PHONE:		MOBILE:	
FAX:		EMAIL:	
PROPOSED RENT:	\$ + GST	GROSS / NET	PER: MONTH / ANNUM
TERM OF LEASE:	YEARS	OPTION:	YEARS
BOND:	\$	RENT IN ADVANCE:	
RENT REVIEW:	CPI OR () % Whichever Is Greater		
INTENDED USE:			
COMMENCEMENT DATE:			
OUTGOINGS:	WATER: ()	COUNCIL: ()	
	STRATA:()	INSURANCE: ()	
SPECIAL CONDITIONS:			
CURRENT LANDLORD DETAILS:			
DIRECTOR 1:			
DIRECTOR 2:			
SOLICITOR CONTACT DETAILS:			
Please Provide Business Phone Numbers Only - Mobile Numbers Will Not Be Accepted			
REFERENCE 1:			
REFERENCE 2:			
REFERENCE 3:			

Commercial Property Partners have advised me to consult with Council regarding permission to operate from the premises
Commercial Property Partners have advised me to attain Public Liability Insurance

The lessee will be responsible for any legal costs, professional costs & disbursements reasonably incurred as a consequence of tenant requesting termination once terms have been agreed.

PLEASE FORWARD COMPLETED APPLICATION FORM TO:

Commercial Property Partners Pty Ltd OR Fax: (02) 9709 6600
Suite 6, Level 6, 402-410 Chapel Road
Bankstown NSW 2200

NAME:	SIGNATURE	DATE: