



Relationship to applicant

	admin@yourcps.com.au						
PROPERTY ADDRESS							
APPLICANTS CONTACT DETAILS	Phone: Fax:		Mobile:				
	Email:						
COMPANY / LESSEE(S) DETAILS:							
Business Name Trading Name							
ACN / ABN	GST Registered	I YES NO	How long has the busin	ness heen tradina?			
Website:							
BUSINESS ADDRESS	Current business address		Previous business add	dress			
Address							
City							
State, postcode							
\$rent per annum							
Date of tenancy	from to	)	from	to			
LANDLORD DETAILS	Current Landlord details		Previous Landlord de	tails			
Company – if applicable							
Phone number							
Email address							
Email address							
DIRECTOR(S) DETAILS	Director 1		Director 2				
	Director 1		Director 2				
DIRECTOR(S) DETAILS	Director 1		Director 2				
DIRECTOR(S) DETAILS Name	Director 1		Director 2				
DIRECTOR(S) DETAILS  Name  Address	Director 1		Director 2				
DIRECTOR(S) DETAILS  Name  Address  City	Director 1		Director 2				
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry	Director 1	Ref	Director 2		Ref		
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth	Director 1	Ref Expiry	Director 2		Ref		
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry  Please ensure a photocopy of the	Director 1  Reference 1.		Director 2  Reference 2.				
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry  Please ensure a photocopy of the ID is submitted with this application							
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry  Please ensure a photocopy of the ID is submitted with this application  BUSINESS / TRADE REFERENCES							
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry Please ensure a photocopy of the ID is submitted with this application  BUSINESS / TRADE REFERENCES  Company							
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry Please ensure a photocopy of the ID is submitted with this application  BUSINESS / TRADE REFERENCES  Company  Name							
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry Please ensure a photocopy of the ID is submitted with this application  BUSINESS / TRADE REFERENCES  Company  Name  Phone number							
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry Please ensure a photocopy of the ID is submitted with this application  BUSINESS / TRADE REFERENCES  Company  Name  Phone number  Email address:	Reference 1.		Reference 2.				
DIRECTOR(S) DETAILS  Name  Address  City  State, postcode  Date of birth  ID type, reference & expiry Please ensure a photocopy of the ID is submitted with this application  BUSINESS / TRADE REFERENCES  Company  Name  Phone number  Email address:  PERSONAL REFERENCES	Reference 1.		Reference 2.				

<sup>\*</sup> Please ensure your nominated references and current landlords are advised they will be contacted by our office. Please note we reserve the right to request further references if deemed necessary to adequately assess your application.

### PROPOSED TENANCY TERMS

I/We herein confirm that I/we wish to lease the above premises under the proposed following terms

Length of lease Option Period

Lease start date Advertised Tenant occupation Date Proposed

Annual Rent Annual Rent

Advertised Annual Outgoings Proposed Annual Outgoings

#### **Permitted Use:**

Details of the nature of the business to be carried out at the premises

### **WORKS TO PREMISES**

I/We seek permission to carry out the following work to the premises, subject to Landlord, Council and Strata approval.

(Please attach details/plans on a separate sheet of paper if required).

I/We request that the Landlord carry out the following work to the premises prior to the commencement of the lease.

(Please attach details on a separate sheet of paper if required).

## ASSOCIATED COSTS

Rent: One (1) calendar months' rent (GST inclusive) is payable upon approval of this application and will be held in trust

as a deposit to secure the tenancy until the lease is executed. If the lease proceeds, this deposit will be applied to

the first months' rent if applicable.

**Rental Bond:**A Bond or Security Deposit is payable upon execution of the lease

Lease Administration Fee: REINSW Unregistered Lease Administration Fee is payable upon execution of the lease for lease terms (including

options) of no more than three (3) years.

Lease Preparation Fees: Should the lease over the premises be prepared by a solicitor or conveyancer, the solicitor/conveyancer will

charge their fees, plus disbursements, mortgagee consent fees and any other relevant fees associated with the

preparation of the lease separately.

# I CAN CONFIRM THE FOLLOWING

- I acknowledge that this is an application to lease the specified property/premises and that my application is subject to the Landlord's approval.
- 2. I consent to the information provided in this application being verified and a reference check on The TICA Group Database, Police and with the trade/business referees provided and maybe liable for any reasonable costs associated with these checks.
- I acknowledge that once instructions have been given by the Landlord to commence lease preparations that I am responsible for any associated expenses or solicitors fees incurred should I decide to withdraw or not proceed with my application subject to the Retail Leases Ac

### **Application:**

I, the Applicant understand that the minimum cover required for Public Liability is \$20million. The Landlord reserves their right to request a higher level. Please note a copy must be provided to the Landlord or Agent before commencement of lease.

I, the Applicant apply for approval to lease the premises referred to in this form and acknowledge that my application will be referred to the Landlord of the property for his / her / their acceptance.

I, the Applicant, declare that I am not a bankrupt or an undischarged bankrupt and that the information provided by me is true and correct

If more than one applicant, we acknowledge reference to "I" means we/each applicant applying.

Applicant 1:	Print Name	Signature	Date
Applicant 2:	Print Name	Signature	Date