

COMMERCIAL APPLICATION FORM

Thank you for considering The West End area as a possible location for your business. Kindly complete this confidential application form for consideration.

APPLICANT DETAILS

Date: _____ Name: _____ D.O.B.: _____
Address: _____
Mailing Address: _____
Home Tel: _____ Work Tel: _____ Cell : _____
Fax: _____ Email: _____

BUSINESS INFORMATION

Business Name: _____
Type of Business: _____
Current Business Relocation Expansion New Business Proposed Start up Date: _____
Current Business Address: _____
Tel: _____ Fax: _____ Email: _____

If Current Business - How long has this business been in operation? _____
Business Structure Limited Liability Partnership Sole Partnership Other
Business References: (Owner name, Business Name, Contact #'s, Address) _____

CREDIT INFORMATION

Bank/Credit Reference: _____ Bank/Credit Tel: _____
Bank/Loan Officer: _____
Do You Currently Have Liability Insurance: YES NO Coverage Amount: _____ (Please provide copy of Insurance Certificate.)
Name and Address of Insurance Company: _____
Tel: _____ Fax : _____
Additional Information: _____



REQUIREMENTS

Specific Building/Space for Rental: _____ Floor Space Required: _____

Second Choice Building/Space for Rental: _____ Purpose: _____

Move in Date: _____ Business Hours/Days: _____

How many people will be working at this facility? _____

Are you willing to accept the building in its current state? YES NO

Special Requirements:

Floors	YES	NO	Comments: _____
Windows	YES	NO	Comments: _____
Walls	YES	NO	Comments: _____
Parking	YES	NO	Comments: _____
Electrical	YES	NO	Comments: _____
Telephone/Faxes	YES	NO	Comments: _____
Air-conditioning	YES	NO	Comments: _____
Water	YES	NO	Comments: _____
Toilets	YES	NO	Comments: _____
Kitchen	YES	NO	Comments: _____
Other	YES	NO	Comments: _____

GENERAL INFORMATION & LEASE REQUIREMENTS

To complete this application, kindly attach a detailed business plan that indicates the following components: (If Applicable)

- 1) Monthly Sales Projections
- 2) Annual Sales Projections
- 3) Monthly Salaries
- 4) Monthly Expenses
- 5) Average Item Sales Projections
- 6) Product Research Information
- 7) Customer Base

The above summary is not intended to be all-inclusive. Please send all business proposals to:

Joanna Cranfield

Assistant Manager - Business Development
West End Development Corporation
P.O. Box MA 415, Mangrove Bay MA BX
Tel: 234-1709
Fax: 234-3411
Email: jcranfield@wedco.bm

All information on this application form will be kept confidential.

