



Specialty Leasing Application

Thank you for your interest in the Jones Lang LaSalle Specialty Leasing Program. Please complete this application in its entirety. **Any financial statements, financial projections, photographs, illustrations, sample merchandise, or business plan that might enable us to further evaluate your business would be helpful.** Please note that failure to fill out all applicable information may delay the processing of, or result in the denial of your application.

Please note that all fees, including security deposit and monthly rent payments must be remitted via Certified Payment. No personal or business checks will be accepted. Proof of insurance, business license, security deposit, and all applicable fees are due prior to the first day of occupancy.

PERSONAL INFORMATION

Applicant Name		Social Security Number	
Home Street Address	City	State	Zip Code
Home Phone		Mobile Phone	
E-Mail Address		Alternate E-Mail Address (If Applicable)	

COMPANY INFORMATION

Company Name		Trade Name (DBA):	
Business Street Address (If different than above)	City	State	Zip Code
Business Phone	Business E-Mail Address		
Business Facsimile	Federal Employer Identification Number (FEIN)	Number of Years in Business	
Business Structure (Check only one) <input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Franchise			
State of Incorporation (If Applicable)		Business Website (If Applicable)	
Current Locations (If Applicable)			
Name of Guarantor (Individual who will guarantee the license other than Applicant. If the Guarantor is the Applicant, write "Same" and skip to Licensing Information)			
Street Address	City	State	Zip Code
Social Security Number		Mobile Phone	
Business Phone		Business Facsimile	

LICENSING INFORMATION

Specialty Leasing Type <input type="checkbox"/> RMU (Cart) <input type="checkbox"/> Kiosk (Provided by merchant) <input type="checkbox"/> In-Line Store <input type="checkbox"/> Vending <input type="checkbox"/> Display/Demo <input type="checkbox"/> Event/Show <input type="checkbox"/> Advertising			
Desired Start Date	Desired End Date	Location Preference (List unit #'s in order of preference)	
Are you interested in renting additional storage space within the center? <input type="checkbox"/> Yes: How Many Square Feet? _____ <input type="checkbox"/> No		Will you require more than 20 AMPs of electrical service? <input type="checkbox"/> Yes: How Many? _____ <input type="checkbox"/> No	

Specialty Leasing Application (Continued)

BUSINESS PLAN INFORMATION

Previous Retail Experience	
Other Locations in JLL Properties	
Type of Merchandise to be Sold	Merchandise Price Points
Are you a wholesaler? If yes, do you sell to nationals or independents? Please specify.	Projected Monthly Sales (Dollars)
Please list your major merchandise categories and your percent of inventory and estimated percent of sales in parentheses: EXAMPLE: Trade Magazines (10% of Inventory, 5% of Sales)	

BANKING INFORMATION

Name of Institution (Include Branch of Account)	Phone	
Street Address	City	Zip Code
Checking Account #	Savings Account #	

OPERATING INFORMATION

Estimated Start-Up Cost (\$)	How will you use this capital?	
Estimated Inventory (\$)	Estimated Inventory Turn (___ per ___ months)	
Estimated Number of Employees	Estimated Cost of Labor (\$/month)	
List any additional expenses		
Target Market/Demographic	Advertising	
Miscellaneous Operating Details:		

OTHER REQUIREMENTS

Please note that all applications must be submitted with the following to be considered complete:

- Copy of applicant's Driver's License, State Identification Card, Passport, and Social Security Card
- Copy of Articles of Incorporation and/or Business License
- Copy of a recent utility bill (electric, gas, water, or telephone) that confirms the street address of the applicant
- Completed W-9 Form
- Photos and/or samples of the product and any photos of other concept locations (if applicable)

I certify that all the information listed on this application is true to the best of my knowledge. By signing below, I acknowledge that I will be held fully responsible for any falsification or misrepresentation of this information. Further, I understand that this application does not represent a contract with executable terms. Neither Jones Lang LaSalle Americas, Inc. or myself are under any obligation to the other with respect to the information provided until a mutually acceptable License Agreement has been prepared and executed.

Applicant Signature

Date