



Tenant Lease Application

DATE:

PROPERTY:

FULL NAME

First

Middle

Last

Email Address

Phone

Cell

TYPE OF BUSINESS:

DESIRED SPACE SIZE:

SPECIAL NEEDS (i.e. Dock Door)

COMPANY / BUSINESS NAME

COMPANY / BUSINESS ADDRESS

Number & Street

City

State

Zip

Telephone

Existing Business

New Business

OTHER BUSINESS HISTORY:

Please attach any Brochures, Flyers, and/or Pictures of your concept.
Once filled out please Email back to info@cartelgroup.com.