



TRINBAGO COMMERCIAL
DEVELOPMENT CO. LTD.
Lot D. MovieTowne Blvd.
Audrey Jeffers Highway
Port of Spain

tenancy application form

BUSINESS INFORMATION

COMPANY NAME: _____

ADDRESS: _____

TELEPHONE: _____ FAX: _____

CONTACT NAME: _____ EMAIL: _____

NAME/S OF SHAREHOLDER/S AND TITLES: _____ TITLE/COMPANY

Please include a copy of at least one (1) form of ID for each principal Shareholder with this application

_____ TITLE/COMPANY

TYPE/NATURE OF BUSINESS: _____

PROPRIETORSHIP PARTNERSHIP LIMITED YEAR ESTABLISHED: _____

PREVIOUS RETAIL EXPERIENCE? YES NO

PREVIOUS EVICTIONS OR BANKRUPTCIES? YES NO

RENTAL HISTORY: Current Landlord Name/Phone Rental Address Dates of Tenancy

Previous Landlord Name/Phone Rental Address Dates of Tenancy

TYPES OF GOODS AND/OR SERVICES TO BE SOLD (List of brand names, items, products, etc.)

LOCATION PREFERENCE (e.g. ground floor, first floor, kiosk, shop number...)

1ST CHOICE: _____ 2ND CHOICE: _____

SIZE OF SPACE REQUIRED (ft²): _____

CREDIT/FINANCIAL INFORMATION

INVESTMENT (TT\$) ANTICIPATED INCLUDING INTERIOR DESIGN: _____

PROJECTED GROSS SALES (avrg. mthly): _____

BANK/FINANCIAL INSTITUTION: _____

ADDRESS: _____

BANK ACCOUNT(S) CHECKING For Purposes Of Refunding Deposit SAVINGS For Purposes Of Refunding Deposit

TRADE REFERENCES: 1 _____ NAME & ADDRESS CONTACT #

2 _____ NAME & ADDRESS CONTACT #

DATE: _____ APPLICANT'S SIGNATURE: I hereby declare that the details furnished herein, are true and correct.