

APPLICATION FOR ASSIGNMENT OF LEASE

STRICTLY CONFIDENTIAL

Please note this application incurs a fee which is due for payment before this application is processed. Please contact our office for further details.

This fee does not include the landlords costs for preparation of the required legal documentation in the event this application is successful.

Business Name					
Location of Leased Premises					
APPLICANT DETAILS IF INDIVIDUAL OR PARTNERSHIP					
Name:					
Address:					
Home phone:	Mobile:	Work phone:			
Email:					
APPLICANT DETAILS IF COMPA	ANY				
Company Name:					
ACN:					
Registered Office:					
Details of Directors: .					
(Full Names and Address's)					
BUSINESS STRUCTURE (Please	Tick)				
Sole Trader					
Partnership					



Company



REFERENCES

Please provide details of references that may be contacted and include any existing written references with this application **Business References:**

Hau	- $ -$	10101	nces:

Other references:

Any objections to the checking of references: (Please Tick)

YES

No

STATEMENT OF ASSETS AND LIABILITIES

Name:

Address:

ASSETS	VALUE (\$)	LIABILITIES	OWING (\$)
House/Property/Land		Mortgages	
1.		1.	
2.		2.	
3.		3.	
Other Property		Loans	
1.		1.	
2.		2.	



3.	3.		
Furniture/Household Items/Plant/Equipment	Bank Overdraft/Credit Cards (Current Owings)		
1.	1.		
2.	2.		
3.	3.		
Motor Vehicles	Hire Purchase/Lease		
1.	1.		
2.	2.		
3.	3.		
Other Assets	Other Liabilities		
1.	1.		
2.	2.		
3.	3.		
4.	4.		
5.	5.		
Total Assets	Total Liabilities		
Surplus of Assets Less Liabilities			