SPECIALTY LEASING APPLICATION

Date:_____

Applicant's Name:_____

Business Name:_____

Mailing Address:_____

Telephone Numbers: Home: _____Business:_____Cellular:_____

Fax:_____ Email address_____

(Please circle one) Sole Proprietorship or Partnership or Corporation

State of Incorporation:_____

Proposed Business Name of RMU:_____

Proposed Merchandise/Concept/Theme (Please describe in detail)_____

_____

Product Price Points: From $_____to $_____

What are your ideas for featuring your Specialty Leasing RMU or Store? What visual themes will be used?

_____

_____

When do you wish to begin tenancy? _____

Please attach the following to the signed application:

1: Pictures of proposed business or products (can include color catalog sheets, photographs of existing RMUs/stores, and samples).
2: List of products, colors, and signs.

I have made an honest representation in answering the questions in this application, and do hereby certify that all information is accurate and correct.

_____ _____ _____
Signature Print Name Date

Please forward completed application and requested information to:

Specialty Leasing Department
The Promenade Bolingbrook
631 East Boughton Road #220
Bolingbrook, Il 60440
Email Specialty Leasing

All applicants will be considered by for tenancy by the Management of The Promenade Bolingbrook. The signing of the application by the proposed licensee does not constitute acceptance into the Specialty Leasing Program at The Promenade Bolingbrook.

***** Execution of this application in no way grants consideration, acceptance or tenancy at any Forest City Enterprises, centers without the express written consent of the center's management and its affiliates in the form of a fully executed License Agreement.

10/12/11