



COMMERCIAL TENANCY APPLICATION

How to Complete This Application

You are responsible for ensuring that your application is correct and complete. Responsibility for ensuring that the application is received by the Landlord rests with the Applicant. The Landlord is not responsible for lost emails or submissions, or other issues including technology issues, which may prevent your application from being received by the Landlord. The Landlord will confirm receipt of the application. The Landlord is not responsible and will not be liable to you or anyone else, for any damages whatsoever, including any indirect, special, incidental, or consequential damages, arising out of or in connection with your use of, or inability to use, the application. All inquiries should be directed to the above contact information for the Landlord. It is important to follow the instructions below:

- Type or print clearly.
- Data tables and images may be inserted within this application form or referenced and included in an attachment. If you need more space, please reference the relevant attachment in the application form.
- Do not fill in boxes that do not apply to you. Please leave blank or indicate NA.
- All applications must be sent via email in PDF format to info@chieflouiscrossing.ca.

Section 1: Applicant / Lead Contact

If there are multiple parties, please indicate one lead contact.

Full Name:	<input type="text"/>	Title:	<input type="text"/>
Address:	<input type="text"/>		
City & Province:	<input type="text"/>	Postal Code:	<input type="text"/>
Email:	<input type="text"/>	Phone #:	<input type="text"/>

Section 2: Business Details

Business Name:	<input type="text"/>		
Address:	<input type="text"/>		
City & Province:	<input type="text"/>	Postal Code:	<input type="text"/>
Website:	<input type="text"/>		
Ownership Structure:	<input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation	Number of Years in Operation:	<input type="checkbox"/> None <input type="checkbox"/> Less than or equal to 1 year <input type="checkbox"/> More than 1 year (__ specify #)
Indigenous Ownership:	<input type="checkbox"/> None <input type="checkbox"/> Less than 51% <input type="checkbox"/> Greater than or equal to 51%	Tk'emlups te Secwépemc Membership Ownership:	<input type="checkbox"/> None <input type="checkbox"/> Less than 51% <input type="checkbox"/> Greater than or equal to 51%

Business Category

Flexible spaces for rent are available within Chief Louis Crossing for a variety of services. The Landlord, I303T10 BC Ltd is specifically seeking expressions of interest from potential tenants that fall into one of the following categories. Please mark the applicable category or provide detail if "other".

Preferred:	<input type="checkbox"/> Hospitality: Restaurant, Café, Pizzeria, Specialty Food Services <input type="checkbox"/> Retailers: Cold Beer and Wine, Home Décor, Pet Stores <input type="checkbox"/> Personal Services: Spa, Salon <input type="checkbox"/> Professional Services: Legal, Engineering, First Nations Services, Co-Working, Insurance <input type="checkbox"/> Healthcare Services: Doctor, Dentist, Chiropractic, Massage Therapist, Physiotherapist, Psychiatry, Counselling, Pharmacy
Other:	<input type="text"/>

Officer/Director/Owner #1

Same as Applicant / Lead Contact (if so, leave this section blank)

Full Name:		Title:	
Residence Address:			
City & Province:		Postal Code:	
Email:		Phone #:	

Officer/Director/Owner #2

Full Name:		Title:	
Residence Address:			
City & Province:		Postal Code:	
Email:		Phone #:	

Section 3: Business Overview

Provide a general overview of your company, including for example: mission, mandate, goals, target market, number of employees, and strategy.

Section 4: Tenant Requirements

Proposed use of premises and equipment required / contemplated:

Proposed works / fit-out to be completed by tenant:

Proposed Lease Start Date:

Proposed Lease Length (years):

Other Requests (e.g., square footage and any mandatory or preferred terms and conditions):

Section 5: References

Previous Landlord

Full Name:

Location Address:

City & Province: **Postal Code:**

Email: **Phone #:**

Bank/Financial Reference

Contact Name: **Phone #:**

Bank/Financial Institution:

Account Holder/Name: **Account Number:**

Business Reference #1

Full Name:

Relation:

Email: **Phone #:**

Business Reference #2

Full Name:

Relation:

Email: **Phone #:**

Section 6: Conflict of Interest & Relationships

Do you have any existing or potential conflict of interest, direct or indirect, with the Tk'emlups te Secwépemc?

Yes No If yes, please state the potential conflict of interest.

List any contracts or business arrangements currently or formerly in place between your company and the Tk'emlups te Secwépemc.

Section 7: Supplemental Information

Applicants may be requested to provide some or all the following information at a future date. Applicants are welcome to submit all or some of the following alongside their application.

Attached Documents (check all that apply):

- Previous Business Experience / Curriculum Vitae
- Feasibility Study
- Business Plan
- Business Proforma
- Proof of Assets, Business Credit Report(s), and/or Current Financial Statement(s)

Describe your familiarity and engagement with the Tk'emlups te Secwépemc (e.g., people, projects, organization, etc.)

Describe how your business will advance reconciliation, support capacity development, and facilitate the sustainable economic development of the Tk'emlups te Secwépemc.

Section 8: Authorization:

The undersigned hereby declares that the information provided in this application is complete, true, and accurate and is authorized to submit this application on behalf of the Tenant/Company, officers, and directors.

The undersigned is providing this information and giving its permission so that the Landlord may conduct such investigations and credit checks as the Landlord may deem appropriate for approving/accepting the tenant application.

USE & DISTRIBUTION OF INFORMATION: The Tenant/Company, officers, and directors signing below consent to the collection, use, and disclosure of personal information by the Landlord and its authorized agents for such purposes that relate to the services provided by the Landlord and its authorized agents, including but not limited to leasing, subleasing, assignment of lease, and for determining the creditworthiness of the Tenant/Company, officers, and directors as is consistent with the services provided by the Landlord and its authorized agents. Authorized agents of the Landlord include the Project Management Team of Tk'emlúps te Secwépemc Business and Economic Development and VisionQuest Advisors Inc.

Applicant Name:

Date:

Please save the completed form as a PDF and submit the form and any files, images, and/or attachments to info@chieflouiscrossing.ca