

File No	
ZDO	
PX	

Tenant Information

To be completed by tenant

Return to:	
Fax no.	204-986-6347

Unit No.	Address	Street Name	Postal Code
Tenant name		Contact name	Email:
		Phone No.	Fax No.
Previous tenant name		Previous type of business	

Items	No. of tenants	No. of parking spaces	No. of loading spaces	Signage attached to bldg sq ft	Free standing signage sq ft
1 Single tenant building	1				
2 Multi-tenant building					

Indicate area (sq ft) and use of tenant space:

3	Office	
	Retail area	
	Restaurant / Lounge	
	Warehousing / Storage area	
	Assembling / Manufacturing	

Identify square footage and use of space not listed above:

Total square footage (including, basement, storage, mezzanine)

4	Number of washrooms?	9	Is building sprinklered?	Yes or No
5	Number of exits?	10	Is there a fire alarm system?	Yes or No
6	Is there existing exit lighting?	Yes or No		
7	Is there existing emergency lighting?	Yes or No		
8	Occupant load request (no. of people) <i>(Restaurant, banquet hall, cocktail lounge, beverage rooms etc.)</i>		Is there an increase of occupant load over previous tenant?	Yes or No

If multi tenant building (list adjacent tenants below)

Tenant name	Tenant type of business
Tenant name	Tenant type of business

Business description (eg. type of sales, manufacturing etc. include hours of operation any additional information to process your application)

Tenant signature: _____ Owner or Property Manager _____

Telephone No. _____ Telephone No. _____