

Specialty Leasing Application Form



This application must be received 4 weeks in advance of request date to be considered

Requested Dates: from _____ to _____

Legal Business Name: _____

Doing Business As: _____

Address: Unit # _____ Street _____

City _____ Province _____ Postal Code _____

Contact Person: _____ Phone: _____

Cell: _____ Fax: _____

Email Address: _____

Type of Unit Desired: Cart _____ Kiosk _____ Inline _____ Parking Lot _____

Kiosk Dimensions: Length _____ Width _____ Height _____ Please attach photos/drawings of kiosk

Size of Area _____ Phone required? Yes _____ No _____

Description of Business / Products Sold / Displayed: _____

Please attach photos/drawings of product and/or website for visual information: _____

Business references that may be contacted:

Name: _____ Phone: _____

Name: _____ Phone: _____

- All merchants must provide a valid copy of their Insurance Certificate outlining at least \$3,000,000 in general liability insurance naming 'Revenue Properties Company Limited', 'Morguard Real Estate Investment Trust', 'Prairie Mall Building Limited' and 'Morguard Investments Limited' as additional insured.
- Arrangements for the telephone can be made through Telus and are the sole responsibility and expense of the retailer.
- There is a minimum rental period of one week (Mon-Sun) for all units, with the exception of the Christmas Season, with a minimum rental period of six weeks.
- All units must be manned during all Shopping Centre hours. Soliciting of any kind is strictly prohibited.
- Set up / take down must be done either before or after Mall hours and on the days specified in your License Agreement. No exceptions.
- Post dated cheques are required for the license term and must be received prior to set up, as stated in your License Agreement.
- We have a limited number of Carts available. All Kiosk designs, including all dimensions and photos must accompany this application to be approved in advance by Mall management.
- We will contact you once your application has gone through the approval process.

I have read all enclosed material and hereby submit my application according to the guidelines set out by the Prairie Mall Shopping Centre.

Applicant Signature: _____ Date: _____

Fax completed application to 780-532-7318 or email lleblanc@morguard.com

By completing and signing this form, you are consenting to Morguard collecting, using and disclosing your personal information in order to identify and communicate with you, for such other purposes as may be necessary in order to provide you with the products and/or services you have requested, and for any other purposes where you consent or where such collection, use or disclosure is permitted or required by law.