



Application Form

All information is required. Applications will be denied if fields are left empty.

PERSONAL INFORMATION	
Date of Application Submission:	
Name:	
Mailing Address:	
Mobile Number:	Landline:
Email:	
☐ I acknowledge that WEDCO will use this email address for all comm	unications regarding this Commercial Rental Application.
BUSINESS INFORMATION	
Business Name:	
If Current Business, Length of Time in Operation:	If New Business, Proposed Start Date:
Business Type: Business Structure Limited Liability Current Business Address:	
Work Number:	Email:
Please Provide Two Business References:	

CREDIT INFORMATION		
Bank/Credit Reference:	Bank/Credit Number:	
Do You Have Liability Insurance: Yes No	Coverage Amount: \$(Please provide copy of insurance certificate.)	
Name of Insurance Company:		
Any Additional Information:		
COMMERCIAL REQUIREMENTS		
Specific Building/Space for Rental:	Floor Space Required: Approx.	
Move in Date:	Business Hours/Days:	
Are You Willing to Accept a Building in its Current State:	l No	
SPECIAL REQUIREMENTS		
Parking:		
Electrical:		
Air Conditioning:		
Water:		
Toilets:		
Other:		
ATTACUMENTS AND AUTHORIZATION		
ATTACHMENTS AND AUTHORIZATION Be sure to attach a full business plan, including items like monthly	y and annual sales projections; monthly salaries and	
expenses; average items sales projections; product research inform	nation, customer base and so on.	
For information and/or assistance with creating a business plan	n, please visit www.bedc.bm.	
This application authorizes West End Development Corporation to obtai strictest confidence. I agree that the information submitted is correct and verify all information submitted.		
Signature:	Date:	