

Specialty Leasing Application

This is for informational purposes only and is not to be considered in any way a commitment to enter into a License Agreement with the applicant.

Interested in:

_____ In-Line, Established Size _____ square feet

_____ 4 X 4 RMU (Cart) _____ 3 x 6 RMU _____ Kiosk (12 x 12 Max)

Contact Name: _____ Phone #: _____

Home Address (city and zip) _____

Tenant Name: _____

DBA: _____

Fed. ID#: _____ or SSN: _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Type of Corporation: _____ State of Formation: _____

Business Phone: _____ E-Mail: _____

Items to be sold: _____

Price Range: _____

Desired Terms (i.e. March through August, opening date March 15): _____

Signature: _____ Date: _____

Return This Completed Form With Product Line Information To:

Stephanie Behm

Centerpoint Development Co. L.L.C. c/o Centerpointe Mall

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