

Leasing Application



GT Landev
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Mandaue, Cebu
Philippines
6014
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Please fill up all information Required

Gui-ke(Tenant) Information

Name	<input type="text"/>
Address	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
E-mail Address	<input type="text"/>
Contact Number	<input type="text"/>
	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Tax Identification no.	<input type="text"/>
Community Tax Certificate no.	<input type="text"/>

Business Information

Company Name:	<input type="text"/>
Company Address	<input type="text"/>
	<input type="text"/>
Store name	<input type="text"/>
E-mail Address	<input type="text"/>
Telephone Number	<input type="text"/>
Fax Number	<input type="text"/>
	<input type="text"/>
	<input type="text"/>

Tax Identification no.	<input type="text"/>
Community Tax Certificate no.	<input type="text"/>

Desired Location*

- GT Times Square Cebu ADG Port Cebu(Warehouse) GT Mall Compostela
 ADG Port Cagayan(Warehouse)
 ADG Port Nasipit(Warehouse)

Others

**Mark the sites you would want to establish your business.*

Store InformationCategory Target Market Local/Foreign Age Bracket Area Requirement(sqm) **Branches***

Address	Floor Area(sqm)	Average Monthly Gross Sales	

if applicable*Remarks**

I certify that all above information is true and correct, and i am aware that this form only serves as an application.

Signature

Date/Time Field