## COMMUNICATION AND ALLIED INDUSTRIES PENSION FUND APPLICATION FOR OFFICE SPACE TO LET

(Information provided will be treated with the strictest confidence)

NAME OF ORGANISATION:	
BUSINESS ADDRESS:	
TELEPHONE:	FAX NO
E-MAIL ADDRESS:	
CONTACT ADDRESS AND PERSON:	
DIRECTORS OF COMPANY:	
	ID NO
	ID NO
	ID NO
NATURE OF BUSINESS:	
YEAR OF INCORPORATION:	
ACCOMODATION REQUIRED (in m2)	

(SHOP/OFFICE/FACTORY/ WAREHOUSE)	
USE OF PREMISES:	
DATE ON WHICH ACCOMODATION IS REQUIRED	
PERIOD OF LEASE REQUIRED: _	
ESTIMATED ANNUAL TURNOVI	ER FOR
TWO YEARS AGO:	NEXT YEAR
LAST YEAR:	TWO YEARS TO COME
CURRENT YEAR:	THREE YEARS TO COME
NB: PLEASE PROVIDE YOUR M RESULTS AND PROJECTIO	IOST RECENT AUDITED COMPANY NS
CASH FLOW PROJECTIONS	
INCOME:	
EXPENSES:	
PROFIT (LOSS):	
COMPANY FINANCIAL : (e.g Jan-Dec)	
COMMENTS ON BUSINESS PLAN:	
SURETYSHIP-PERSONAL/BANK ( the inapplicable) NAME OF SURETY:	GUARANTEED/DEED OF SURETYSHIP (delete

ADDRESS:	·
TRADE REFERENCE:	
1	TEL NO
2	TEL NO
3	TEL NO
CURRENT PREVIOUS LANDLORD	
TELEPHONE NO:	
RENT PAYABLE:	
BANKERS BRANCH:	
ACCOUNT NO:	
AUDITORS:	
DATE OF APPLICATION:	
	THIS FORM DOES NOT CONSTITUTE AN OFFER THE HE RIGHT TO APPROVE AN APPLICATION.
FOR OFFICE ONLY	
BUREAU CLEARANCE:	
BANK REPORT:	
TRADE REFERENCE REPO	ORT:

FINANCIAL STATEMENT SHEETS/CASH FLOW PRO	CS: PROFIT/LOSS ACCOUNTS/BALANCE OJECTIONS
RECOMMENDATION:	
INTERVIEWER:	DATE:
APPROVED BY:	DATE:
<u>ATTACHMENTS</u>	
1. LATEST 3 MOTNH	S BANK STATEMENT.
2. COMPANY REGIST	TRATON DOCUMENT.
3. COPIES OF I.DS AN	ND PROOF OF RESIDENCE FOR DIRECTORS.
4. LETTER OF SURET	PY .

• COMPANY SURETY WILL BE REQUIRED TO SUBMIT ITEMS NUMBER 1 TO 3 ABOVE.

OF I.DS AND PROOF OF RESIDENCE.

• INDIVIDUAL SURETY WILL BE REQUIRED TO SUBMIT COPIES