



## SPECIALTY LEASING APPLICATION

Complete and send to: ISinilong@oxfordproeprties.com

### REQUIRED INFORMATION

Legal Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

\_\_\_\_\_

Description of Business

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Website (If applicable) \_\_\_\_\_

Social Media Handles (If applicable) \_\_\_\_\_

\_\_\_\_\_

### TYPE OF UNIT DESIRED

MRU/Cart

Kiosk

In-Line/Pop-up Store

Activation/Events

### PLEASE INCLUDE THE FOLLOWING WITH YOUR APPLICATION

PHOTOS of products

PHOTOS of current location

PHOTOS of previous events/set-ups