

URBAN RETAIL PROPERTIES, LLC **SPECIALTY LEASING**



TO WHOM IT MAY CONCERN,

The Mall at Stonecrest has locations in the common area dedicated to RMUs (Retail Merchandising Units) and various kiosk and vending concepts. Available in-line spaces vary in location, size and condition. Availability will vary from month-to-month.

Please return the following information along with pictures or samples of your product and a depiction of how you would display your merchandise. If you have done business with another center please include those pictures as well. If an opportunity becomes available at The Mall at Stonecrest, we will contact you and you will be asked to complete our application that includes credit history, business plan, W-9, articles of incorporation and/or business license and other requirements.

We thank you for your interest in the Specialty Leasing Program at The Mall at Stonecrest and look forward to the possibility of working with you in the near future.

Sincerely,

Your Specialty Leasing Team

for The Mall at Stonecrest

MallatStonecrest.SpecialtyLeasing@urbanretail.com

THE MALL AT STONECREST

mallatstonecrest.com · 678.526.9880 · 2929 Turner Hill Road, Stonecrest, GA 30038

PERSONAL INFORMATION



DATE _____
APPLICANT(S) NAME _____
HOME ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
MOBILE #(S) _____
HOME # _____
EMAIL ADDRESS(ES) _____

COMPANY INFORMATION

COMPANY NAME _____
TRADE NAME (DBA) _____
BUSINESS STREET ADDRESS _____
CITY _____ STATE _____ ZIP CODE _____
BUSINESS PHONE # _____ BUSINESS EMAIL _____
BUSINESS FACSIMILE _____
FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN) _____ NUMBER OF YEARS IN BUSINESS _____
SOCIAL SECURITY # (IF AN INDIVIDUAL) _____ DRIVER'S LICENSE OR STATE ID# _____
BUSINESS LICENSE # (IF APPLICABLE) _____

BUSINESS STRUCTURE (PLEASE CHECK ONE) SOLE PROPRIETORSHIP CORPORATION PARTNERSHIP LLC FRANCHISE
STATE OF INCORPORATION (IF APPLICABLE) _____ BUSINESS WEBSITE (IF APPLICABLE) _____
CURRENT LOCATIONS (IF APPLICABLE) _____

NAME OF GUARANTOR (INDIVIDUAL WHO WILL GUARANTEE THE LICENSE OTHER THAN APPLICANT. IF THE GUARANTOR IS THE APPLICANT, WRITE "SAME" AND SKIP TO LICENSING INFORMATION) _____
STREET ADDRESS _____ CITY _____ STATE _____ ZIP CODE _____
SOCIAL SECURITY # _____ MOBILE PHONE # _____
BUSINESS PHONE _____ BUSINESS FACSIMILE _____

LICENSING INFORMATION

SPECIALTY LEASING TYPE RMU (CART) KIOSK IN-LINE VENDING DISPLAY/DEMO
 PARKING LOT OFFICE ALTERNATIVE INCOME

DESIRED START DATE _____ DESIRED END DATE _____ LOCATION PREFERENCE _____
ARE YOU INTERESTED IN RENTING ADDITIONAL STORAGE SPACE WITHIN THE MALL (IF AVAILABLE)? YES NO HOW MANY SQ FT? _____
WILL YOU REQUIRE MORE THAN 20 AMPS OF ELECTRICAL SERVICE YES NO HOW MANY AMPS? _____
ADDITIONAL URBAN RETAIL PROPERTIES CENTERS AND/OR REGIONAL AREAS OF INTEREST _____

BUSINESS INFORMATION



HAVE YOU EVER BEEN A SPECIALTY RETAILER AT A SHOPPING CENTER BEFORE YES NO

IF YES, LIST CENTERS BELOW (ATTACH ADDITIONAL SHEET IF NECESSARY.)

SHOPPING CENTER/LOCATION	TERM	ANNUAL GROSS SALES
1. _____		
2. _____		
3. _____		

OTHER RETAIL AND/OR INTERNET BASED SALES EXPERIENCE _____

TYPE OF MERCHANDISE TO BE SOLD _____

MERCHANDISE PRICE POINTS _____

PROJECTED MONTHLY SALES (DOLLARS) _____

PLEASE LIST YOUR MERCHANDISE AND YOUR PERCENT OF INVENTORY.

Insurance Requirements Certificate of Insurance

Licensee may not open or operate without proper evidence of insurance provided in advance to The Mall at Stonecrest Management Office. General Liability Insurance in the amount of \$2,000,000 (general aggregate), Employer’s Liability of at least \$500,000 per occurrence, Workers Compensation as required by statute, and Personal Property insurance for replacement cost.

SHOWING AS ADDITIONAL INSURED

- Urban Retail Properties, LLC;
and their owners, employees and agents,
acting as Manager for Stonecrest Mall, SPE, LLC, Owner.

SHOWING AS CERTIFICATE HOLDER

- Stonecrest Mall SPE, LLC
2929 Turner Hill Rd.
Stonecrest, GA 30038

THE MALL AT STONECREST