

Retail Property Sublease Consent Request Form

Sublessor (Current Tenant) Information

Name/Entity

Contact Person

Phone

Email

Address

Property Information

Property Address

Suite/Unit Number

Lease Commencement Date

Lease Expiration Date

Sublessee (Proposed Tenant) Information

Name/Entity

Contact Person

Phone

Email

Address

Sublease Details

Area to be Subleased (sq. ft.)

Proposed Sublease Term (mm/dd/yyyy to mm/dd/yyyy)

Sublease Rent Amount

Proposed Use

Additional Terms / Comments

Attachments

Sublease Agreement Copy

Choose File

No file selected

Proposed Sublessee Financials (if required)

Choose File

No file selected

Other Attachments

Choose File

No file selected