

New Location: _____

Previous Lease #: _____

Accepted/Rejected: _____

Remodel: _____

Date: _____

PROPOSAL

Store # _____

Legal Name and Address of Lessor:

(Must match W-9)

Lessor SSN or Fed. ID #

Name and Title for All Members

Primary Contact

Day Phone #

Cell Phone #

Email:

Site/Location Address:

(include Suite #)

of Years:

Beginning Date: _____ Ending Date: _____

Proposed Rent:

Years: _____

Years: _____

Per SF \$ _____

Per SF \$ _____

Month \$ _____

Month \$ _____

Annual \$ _____

Annual \$ _____

Total Square Footage included in Rent:

Other relevant information for building site:

*Site plan, legal description, and construction exhibit are required for all leases.
 Lessor to furnish any licenses, permits, and/or architectural drawings that may be required.

Printed Name of Lease Authorized Signor

Signature of Lessor

Please Return Form to:

Date

Alabama ABC Board

Real Estate Division

Realestate@abc.alabama.gov

334-290-4264