



fresh new  
storefront  
retail downtown

# PUSH APPLICATION FORM

## PROPERTY OWNER / LANDLORD

### CONTACT INFORMATION

Name \*

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First

Last

Email \*

Phone \*

Mailing Address \*

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Street Address

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Address Line 2

City

Province

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Postal Code

### DETAILS ABOUT YOUR SPACE

Address of Available Location \*

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Please enter the street address of the location you are proposing to use for PUSH

**How much space do you have available? (Square Footage) \***

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**What are your rent expectations for this space? (Monthly amount) \***

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**What is the approximate amount you expect to receive in rent for the duration of your PUSH agreement? This may be a different amount than your expectations for a long-term lease?**

*\*Please attach a current floorplan of the available space. PDF Files will be accepted.*

*\*Please attach a current photo of the space. JPEG or PNG Files will be accepted.*

## **ADDITIONAL INFORMATION OR QUESTIONS**

**Do you have any other questions or comments?**

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Submit this form with all appropriate attachments to:  
**Chabluk@centreventure.com**