

Retail Kiosk Application Form

St Anns Road

Date:	
Applicant Information	
1. Full Name:	
2. Business Name:	
3. Contact Information:	
- Phone Number:	
- Email Address:	
- Address:	
4. Business Website/social media (if any):	
Kiosk Details	
1. Type of Products/Services Offered:	
Please provide a brief description of the products or services you intend to sell or offer from t kiosk.	he





!. Why do you want to operate a kiosk in this location?
. How do you plan to attract customers to your kiosk?
additional Information
Unique Selling Proposition (USP):
What makes your business unique? Why should customers choose your kiosk?
. Proposed Operating Hours:
Indicate the hours you plan to operate your kiosk.



3. Any Special Requirements (e.g., electricity, water, storage, extraction)

4. If you have a business plan, please attach it to this application form.
References
1. Business References (if any):
Please provide contact details for two references who can vouch for your business experience or character.
- Reference 1:
- Name:
- Relationship:
- Contact Information:
- Reference 2:
- Name:
- Relationship:
- Contact Information:
Agreement and Signature
I certify that the information provided in this application is true and complete to the best of my knowledge. I understand that providing false or misleading information may result in the rejection of my application or termination of any lease agreement.
Signature:
Date:

Please send all applications by email only to corporate.landlord@harrow.gov.uk addressed to Antonio Fernandes



For Office Use Only

Application Received By: ______

Date: _____

Review Notes: _____