



Specialty Leasing Application

This is for informational purposes only and is not to be considered in any way a commitment to enter into a License Agreement with the applicant.

Interested In:

_____ Christmas in July Pop-Up, July 18th 11 AM -7 PM

LEGAL ENTITY Tenant Name: _____

Business Name / DBA: _____

Business Address: _____

Home Address: _____

Business Phone: _____ Home Phone: _____

Fax: _____ Email: _____

Items to be sold:

Range of product prices:

One day fee for participation: __\$50__

Signature: _____ Date: _____

RETURN THIS COMPLETED FORM ALONG WITH PICTURES OF YOUR
CURRENT BUSINESS AND/OR PRODUCT LINE INFORMATION TO:

Alexandria Mall Management Office

3437 Masonic Drive

Alexandria Mall

Alexandria, LA 71301

Phone: 318-619-2754 questions

Fax: 318-442-9848

Email: malissa.smoot@JLL.com

Please list the shopping center/market that you have been a merchant at most recently:

Center/Market: _____

Contact Person: _____ Phone Number: _____

Approximate Date: _____ Average Gross Sales: _____