**Form E1: Application to rent/lease Council accommodation (businesses)**

1. **Purpose of the form**

Please use this form to tell us your accommodation needs. This will allow us to assess your requirements and check whether we have any suitable accommodation. Please note that your application will be assessed to ensure that your proposal is in line with the Council’s corporate priorities and current planning guidance.

**Please read guidance E1a before completing this form.**

1. **Details of your requirements**

Please complete all sections below and include evidence where requested.

|  |  |  |
| --- | --- | --- |
| **Contact details** | | |
| **1** | | **Name of business:** |
| **2** | | **Contact details for lead representative of business:**  Name:  Address:  Email address:  Management Position:  Telephone number(s):  Home:  Work:  Mobile: |
| **3** | | **How long has your business been established?** |
| **Less than one year**  **1-3 years**  **4-6 years**  **7+ years** |
| **Your business and accommodation requirements** | | |
| **4** | | **What do you plan to use the accommodation for?** |
|  |
| **Building requirements** | | |
| **5** | **Please provide details of size of accommodation required and any other requirements you have regarding layout and facilities – please tick as required** | |
| Kitchen  Parking facilities  **Overall space required:**  Less than 500sqft  501sqft -1000sqft  1001sqft -1500sqft  1500sqft -2000sqft  2000sqft -5000sqft  Other space required (Please specify)  Please use text to add any other information below: | |
| **6** | **How many people do you need to accommodate and how often do you wish to use the accommodation (please give details of days and times where possible)** | |
| Number of people to accommodate (approximately):  Number of days per week that accommodation is required  1  Preferred days/times:  2  3  4  5  6  7 | |
| **7** | **Length of time your business wishes to occupy the accommodation - please tick** | |
| |  |  |  |  |  | | --- | --- | --- | --- | --- | | Less than 1 year | | |  | | | 1 to 3 years | | | |  | | 4 to 7 years | |  | | | | Any other length of time  - please state \_\_\_\_\_\_\_ | months/years (delete as required) | | | | | |
| **8** | **Date from which you wish to occupy the accommodation** | |
|  | |
| **9** | **Have you previously used other accommodation in the borough? If so, please provide details, including the address.** | |
| Yes  Address \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No | |
| **10** | **Do you have any preferences regarding in which area of the borough the accommodation is located? If so, please state ward/postcode area.** | |
|  | |
| **11** | **Do you need to apply for licensing? (This may apply if you intend to sell alcohol, for example.)** | |
| Yes  - please state type of licence required \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  No  Don’t know | |
| **Anything else?** | | |
| **12** | | **Please provide any other information that will help the Council understand your requirements, including how much you are willing to pay for the accommodation (this will help us to match you to properties) – please use additional paper if necessary** |
|  |
| **13** | | **Please tick box to confirm that you have enclosed a copy of the operations plan or business plan for your business** |
| **14** | | **Please tick box to confirm that you have enclosed evidence of the financial viability of your business (two years of accounts, unless you have been operating for less than two years)** |
| **15** | | **Please tick box to confirm that you understand that should an offer of accommodation be made, your organisation will be responsible for ensuring that health and safety, safeguarding and any other statutory obligations are met** |
| **16** | | **The Council usually issues full repairing and insuring leases. This means that if we grant you a lease you will be responsible for internal and external repairs and servicing any equipment in the building (e.g. alarms/fire extinguishers). If we have accommodation to offer you, the details of these requirements will be given to you in the Heads of Terms that you will receive before being given the lease. Please tick the box to indicate that you understand that you will be responsible for repairs and maintenance, should an offer of accommodation be made** |
| **17** | | **Privacy Notice and Consent:**  [**https://www.walthamforest.gov.uk/content/estate-management-services-privacy-notice**](https://www.walthamforest.gov.uk/content/estate-management-services-privacy-notice)  **I have read the Privacy Notice and I confirm and give consent to The Council to collect, store and process my information as pertaining to assessing my application to lease a commercial property.** |

1. **Contact Details**

Return the completed form, along with supporting information/documents in the post or via email – contact details below:

Commercial Estate and Investment Team

**Address:** Waltham Forest Town Hall, Forest Rd, London E17 4JF

**Telephone:** 020 8496 8074 / 8069

**Email:** [PropertyEnquiries@walthamforest.gov.uk](mailto:PropertyEnquiries@walthamforest.gov.uk)

**PLEASE NOTE WE WILL, WITH YOUR PERMISSION, KEEP THIS FORM ON FILE FOR ONE YEAR SO WE CAN CHECK ASSESS YOUR ACCOMMODATION REQUIREMENTS AGAINST OUR VACANT PROPERTY LIST AND INFORM YOU IF WE HAVE ANY SUITABLE PROPERTIES AVAILABLE.**