



Date of Application:

Retail Leasing Application Form

Letter of Intent *	
Retailer Category*	<input type="checkbox"/> Anchor <input type="checkbox"/> Lineshop <input type="checkbox"/> Food & Beverage <input type="checkbox"/> Service <input type="checkbox"/> Speciality

*For office use only

Trading Name		
Type of legal entity (i.e. LLC, PLC, etc.)		
Geographical Trade Profile	<input type="checkbox"/> International <input type="checkbox"/> Regional <input type="checkbox"/> Local	
Trade License No.		
Owner / Franchisee		
Postal address		
Physical address		
Contact person name	Mr/Mrs/Ms	
Telephone Number		
Fax Number		
Mobile		
Email		
Website address		
Number of years in business		
Number of countries represented in		
Number of existing outlets	Shopping Malls	Street Outlets
Latest Shop Location		



How did you hear about Dubai Festival City?	<input type="checkbox"/> TV <input type="checkbox"/> Newspaper / Magazine <input type="checkbox"/> Radio <input type="checkbox"/> Internet <input type="checkbox"/> Billboard <input type="checkbox"/> Other (what?) _____	
Shop Activity		
Shop required at Dubai Festival City	Shop Name	Shop Size
Target market price range	<input type="checkbox"/> Low <input type="checkbox"/> Middle <input type="checkbox"/> Middle Plus <input type="checkbox"/> High	
Current turnover in Dhs per annum in average performing outlet	Turnover	Shop Size
Current turnover per annum in lowest performing outlet		
Future growth plans		
Notes		

Full Name: _____

Position: _____

Signature: _____

Date: _____

Contact Details:

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