

GUIDANCE NOTES FOR COMPLETION OF OFFER FORMS

APPLICANTS FOR COUNCIL PROPERTY ARE REQUIRED TO OBSERVE AND COMPLY WITH, WHERE APPROPRIATE, THE FOLLOWING POINTS:-

1. TENDER OFFER FORM	a) All sections of the Offer Form and Supplementary Information form must be completed.
	b) Incomplete offer forms may invalidate the offer and result in the offer not being considered.
	c) Any additional information which forms part of your offer should be attached to the form and signed and dated by the offerer.
	d) Information included in the offer, and subsequently found to be incorrect or misleading may invalidate the offer or any subsequent tenancy granted.
	e) The Council is not obliged to accept the highest or any offer.

2. TENDER ENVELOPES	a) The enclosed tender envelope must be used for any offer whether hand delivered or posted.
	b) The tender envelope must state clearly the offerer's name and the address of the subjects for which the offer is made.
	c) Tenders must be received at the Department's Reception Desk before the deadline stated, otherwise they will be returned unopened.

3. HAND DELIVERED OFFERS	a) Ensure correct date and time of receipt is stamped on envelope.
	b) Ensure you receive similarly timed and dated receipt of your offer.

4. POSTAL OFFERS	a) The tender envelope must be used to return the completed Offer Form etc.
	b) Tender envelopes must be received in this office by the stipulated deadline.
	c) No receipt will be given.

5. FACSIMILE TRANSMISSION	Offers submitted by facsimile transmission are not acceptable.
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GLASGOW CITY COUNCIL
DEVELOPMENT AND REGENERATION SERVICES
 229 GEORGE STREET, GLASGOW G1 1QU TEL : 0141 287 8555

OFFER FORM – PREMISES TO LET

I/WE OFFER TO LEASE THE PREMISES SITUATED AT :

Address

..... Postcode

ON THE FOLLOWING TERMS :

1. RENTAL OFFERED :
 (Exclusive of Local Rates and Service Charges)

£ per.....
 (State rental in words:
 Sterling)

2. PROPOSED USE

.....

3. i) LENGTH OF LEASE

i) Long Lease / Annual / Monthly

ii) IF LONG LEASE SPECIFY NUMBER OF YEARS

(ii) Years

4. DESCRIPTION OF ANY FITTING OUT/WORKS TO BE CARRIED OUT BY OFFERER

.....

5. ESTIMATED COST OF WORKS

£

6. i) IS OFFER CONDITIONAL ON A RENT FREE PERIOD BEING GRANTED Yes No

ii) IF YES PLEASE SPECIFY PERIOD

.....

7. ARE THERE ANY OTHER CONDITIONS APPLICABLE TO THIS OFFER

.....

8 NAMES OF OFFERER/S – PLEASE ENTER DETAILS

FULL NAME (BLOCK CAPITALS)	SIGNATURE	DESIGNATION (if applicable)	DATE
.....
.....

9. NAME AND ADDRESS OF APPOINTED AGENT

Name

Address

..... Postcode

PLEASE COMPLETE THE ATTACHED **i) SUPPLEMENTARY INFORMATION FORM*** * Delete as appropriate
ii) BANK REFERENCE AUTHORISATION FORM*

THE COUNCIL IS NOT OBLIGED TO ACCEPT THE HIGHEST OR INDEED ANY OFFER.



GLASGOW CITY COUNCIL
DEVELOPMENT AND REGENERATION SERVICES

**PROPOSED TENANCY
SUPPLEMENTARY INFORMATION**

(N.B COMPLETE ALL SECTIONS IN BLOCK CAPITALS - USING ADDITIONAL SHEETS IF REQUIRED.
EACH APPLICANT TO COMPLETE A SEPARATE FORM.)

PROPERTY ADDRESS	Address
 Postcode

FULL NAME OF APPLICANT	Name.....
HOME ADDRESS (If company give Head Office Address)	Address
 Post Code
TELEPHONE NUMBER	Business
	Home

SECTION 1	
LENGTH OF TIME AT ABOVE ADDRESS	<input type="text"/> Years
	as Owner Occupier <input type="text"/> or as Tenant <input type="text"/>
a) <u>IF TENANT - GIVE NAME / ADDRESS OF LANDLORD</u>	Name of Landlord
	Address
 Postcode
b) <u>IF LESS THAN 3 YEARS AT ABOVE ADDRESS - GIVE DETAILS OF PREVIOUS ADDRESS AND NAME / ADDRESS OF LANDLORD</u>	Previous Address
 Postcode
	Name of Landlord
	Address
 Postcode

SECTION 2	
a) PROPOSED USE OF PREMISES	<input type="text"/>
b) NUMBER OF PERSONS TO BE EMPLOYED	<input type="text"/> Full Time <input type="text"/> Part Time

SECTION 3

a) LOCATION OF EXISTING BUSINESS PREMISES

1 Address
.....Postcode

Owner Occupier or Tenant

Date of Occupation from / /

Trade/
Business

2 Address
.....Postcode

Owner Occupier or Tenant

Date of Occupation from / /

Trade/
Business

b) IF TENANT COMPLETE THE SECTION BELOW

1 Name and Address of Landlord
Name
Address
..... Postcode

Duration of Lease No of Years

From / / To / /

Current Rent £ per annum

2 Name and Address of Landlord
Name
Address
..... Postcode

Duration of Lease No of Years

From / / To / /

Current Rent £ per annum

SECTION 4

a) LOCATION OF PREVIOUS SHOPS/BUSINESSES

1 Address
.....Postcode

Owner Occupier or Tenant

Date of Occupation From / / To / /

Trade/
Business

2 Address
.....Postcode

Owner Occupier or Tenant

Date of Occupation From / / To / /

Trade/
Business

b) IF TENANT COMPLETE THE SECTION BELOW

1 Name and Address of Landlord
Name
Address
..... Postcode

Duration of Lease No of Years

From / / To / /

Rental £ per annum

Reason for Leaving

2 Name and Address of Landlord
Name
Address
..... Postcode

Duration of Lease No of Years

From / / To / /

Rental £ per annum

Reason for Leaving

SECTION 5

HAVE YOU EVER BEEN INVOLVED WITH A BUSINESS TRADING FROM PREMISES OWNED BY GLASGOW CITY COUNCIL?

Yes No

IF YES GIVE FULL DETAILS INCLUDING ADDRESS, DATES, NATURE OF INVOLVEMENT

.....
.....
.....

SECTION 6

IF FIRST BUSINESS VENTURE - PLEASE COMPLETE SECTION BELOW

a) DETAIL EXPERIENCE IN PROPOSED TRADE

.....
.....
.....

b) IF NO PREVIOUS EXPERIENCE GIVE DETAILS OF ANY TRAINING UNDERTAKEN IN PREPARATION FOR STARTING A NEW BUSINESS

.....
.....
.....

c) HAVE YOU PREPARED A DETAILED BUSINESS PLAN

Yes No

IF YES PLEASE ENCLOSE A COPY

Copy Enclosed

Yes No

d) NAME AND ADDRESS OF PROFESSIONAL ADVISERS

Name
Address
..... Postcode

e) HAVE YOU APPLIED FOR OR ARE YOU IN RECEIPT OF ANY GRANT ASSISTANCE

Yes No

IF YES PLEASE GIVE DETAILS

.....
.....
.....

SECTION 7

HAVE YOU (a) EVER HAD A DECREE AWARDED AGAINST YOU FOR OUTSTANDING DEBT?

Yes No

(b) BEEN DECLARED A BANKRUPT?

Yes No

(c) BEEN INVOLVED IN A COMPANY / PARTNERSHIP WHICH HAS GONE INTO LIQUIDATION / RECEIVERSHIP ETC?

Yes No

IF THE ANSWER TO ANY OF THE ABOVE IS YES GIVE DETAILS

.....
.....
.....

SECTION 8

BANK REFERENCE PLEASE COMPLETE THE ATTACHED PROFORMA IF THE ACCOUNT REFERRED TO IN THE ATTACHED PROFORMA HAS BEEN IN OPERATION FOR LESS THAN THREE YEARS PLEASE DETAIL BELOW

THE NAMES AND ADDRESSES OF PREVIOUS BANKERS WITH ACCOUNT DETAILS, INCLUDING LENGTH OF TIME ACCOUNT HELD.)

.....
.....
.....

SECTION 9

a) PLEASE SUPPLY THE NAMES AND ADDRESSES OF TWO TRADE REFEREES

1

Name
Address
..... Postcode

2

Name
Address
..... Postcode

b) PLEASE SUPPLY DETAILS OF BUSINESS INVOLVEMENT WITH ABOVE

1

.....
.....
.....

2

.....
.....
.....

c) LENGTH OF TIME TRADING WITH ABOVE AND APPROXIMATE VALUE OF MONTHLY BUSINESS (Please give dates)

From / /

To / /

From / /

To / /

£	Per Month
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£	Per Month
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SECTION 10

IF APPLICANT IS / ARE INDIVIDUALS (ie NOT A REGISTERED COMPANY) PLEASE SUPPLY THE NAMES, ADDRESSES, DESIGNATIONS OF 2 UNRELATED PARTIES WHO WOULD SUPPLY CHARACTER REFERENCES ON YOUR BEHALF

1

Name
Address
..... Postcode

2

Name
Address
..... Postcode

SECTION 11

I HEREBY DECLARE THE ABOVE PARTICULARS ARE TRUE

SIGNED

.....

FULL NAME IN CAPITALS

.....

DATE

.....
