



City of Torrance - Community Development Department
Development Review Division

MULTI-TENANT FACILITY BUSINESS REVIEW

Part 1: INFORMATION ABOUT THE PROPOSED BUSINESS OPERATION

Name of Business:	Type of Business:
Previous Location:	Website:
Proposed Hours of Operation:	Days:
Number of Employees:	Average Number of Customers Per Day:
<i>Provide a detailed summary of the typical business activities/services that would be conducted at this location:</i>	
Contact Person:	Phone:
Title/Position:	Fax:
E-mail:	Date: / /

Part 2: INFORMATION ABOUT THE PROPOSED LOCATION

Proposed Address:																																												
Name of Center:																																												
Suite Square Footage:																																												
<i>In order to determine if there is adequate parking for your proposed business at this location, please provide the information below. This information must be obtained from the property owner/property management company. Feel free to attach additional pages if necessary.</i>																																												
Total number of parking spaces available for this center:																																												
CURRENT TENANT LIST FOR THE ENTIRE CENTER																																												
<table border="1"> <thead> <tr> <th>Address/Suite #</th> <th>Business Name</th> <th>Business Type</th> <th>Square Footage</th> </tr> </thead> <tbody> <tr><td>1)</td><td></td><td></td><td></td></tr> <tr><td>2)</td><td></td><td></td><td></td></tr> <tr><td>3)</td><td></td><td></td><td></td></tr> <tr><td>4)</td><td></td><td></td><td></td></tr> <tr><td>5)</td><td></td><td></td><td></td></tr> <tr><td>6)</td><td></td><td></td><td></td></tr> <tr><td>7)</td><td></td><td></td><td></td></tr> <tr><td>8)</td><td></td><td></td><td></td></tr> <tr><td>9)</td><td></td><td></td><td></td></tr> <tr><td>10)</td><td></td><td></td><td></td></tr> </tbody> </table>	Address/Suite #	Business Name	Business Type	Square Footage	1)				2)				3)				4)				5)				6)				7)				8)				9)				10)			
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