



**YOUR REQUIREMENTS PROFILE  
FOR YOUR LOCATION**

**> > OUR SERVICES FOR TENANTS**

THE FOLLOWING CHECKLIST SERVES YOU AND US AS  
PREPARATION FOR A PERSONAL BRIEFING DISCUSSION.

Contact person\*:

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Phone number:

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E-mail\*:

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Industry\*:

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Existing concept:       no       yes

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Location requirements:

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Opening hours required:

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Desired surface (m<sup>2</sup>):

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Required number of seats:

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Guest garden desired:       no       yes    -    Number of seats:

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TECHNICAL REQUIREMENTS:

Electricity (kW):

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Gas       Ventilation       Grease separator

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Operating plant permit available:       no       yes

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**PRINT | RESET | SEND**