	MONTHLY RENT:	DATE OF VISIT
Address - Neighbourhood:  Premises (surface area): Floor:		DESIRED ENTRY DATE
FIRST NAME	SURNAME	//
Nationality	Gross annual income	
B / C PERMIT/OTHER	Occupation	
CIVIL STATUS	Employer	
Current address	Business address	
LOCALITY AND POSTAL CODE	Locality and postal code	
Tel. private	Existing management	
E-MAIL		
LEASEHOLDER OF THE LEASE (legal person)	REA	
COMPANY		
Date of formation		
Current address		
LOCALITY AND POSTAL CODE	No. of employees	
Business telephone	FAX	
E-MAIL		
By WHAT MEANS DID YOU FIND THIS PROPERTY?	inkedin 🗌 immobilier.ch [	Autres
This form must be completed, dated and sign following documents :  For the natural person	ned by the applicant and must be accon	npanied by a photocopy of the
<ul> <li>For Swiss nationals: identity card.</li> <li>For foreigners: B / C permit, passport, oth</li> <li>Last three salary slips, old-age pension, Ca</li> <li>Office of the Elderly, disability insurance, of ployment accounts, employment contract of means.</li> <li>Original certificate from the Office of Pros and Bankruptcy of less than three months.</li> <li>For the self-employed: dated and signed be sheet and profit and loss account.</li> </ul>	er Certificate of the Officantonal Bankruptcy (less than Dated and signed balance or proof account or revised account or rev	ce of Prosecution and three months). Ince sheet and profit and loss counts accompanied by the
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This document contains no obligation to acquire the property mentioned by the management. Confidential information. In the event that a lease is not concluded, the file will be destroyed.

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m3 REAL ESTATE SA

Geneva Place de Cornavin 3 PO Box 1288 CH-1211 Geneva 1 T +41 22 809 09 09 F +41 22 809 09 11