



City of Solana Beach

Business Sub-lease Letter

I confirm that: (Sub-lessee)

Business Name:

Business Address:

Business Certificate #: (if applicable)

Business Owner Name:

Is sub-leasing to the following: (Sub-lessor)

Business Name:

Business Address:

Business Certificate #:

Business Owner Name:

Lessor Signature:

Date:

Lessee Signature:

Date:

After the form is completed and signed, please return to the Finance Department by mail or email. The addresses are provided below.

