## **RETAIL BUILDING DATA SHEET**

FIELDS IN RED ARE REQUIRED

LOCATION		
Property Name:		
Street Address:		
City:	Zip Code:	Locality:
Within Corporate Limits: Yes \( \subseteq \text{No} \subseteq \subseteq \text{Sho} \)	opping Center	
Foreign Trade Zone: Yes  No  F	lub Zone: Yes 🗌 No 🗌	New Market Tax Credit Zone: Yes  No
OWNERSHIP		
Available for Lease: Yes No No Availa	ole for Lease/Purchase:	: Yes No Lease Type:
Minimum Lease Rate (per sq. ft.):		Maximum Lease Rate:
Available for Sale: Yes No Sale Pri	ce:	Publicly Owned: Yes 🗌 No 📗 Date Available:
Owner:	Phone: _	E-Mail:
Broker Contact:	Phone: _	E-Mail:
Submitted By:		Date Submitted:
SPECIFICATIONS		
Total Building Space (sq. ft.):	_ Total Available:	Maximum Contiguous:
Contiguous To Floor: Conti	guous to Suite:	Total Space Per Floor:
Office: Retail:	Other:	
Minimum Space Available: I	Number of Floors:	
Ceiling Height: Multi-Tenant: Yes	☐ No ☐ LEED Cert	tified: Yes  No Date Vacated:
Recent Use:		
CONSTRUCTION		
Construction Type:		
Construction Year: Year of A	dditions:	Roof Type:
Sprinkler Type:	Floor Type:	Floor Reinforced: Yes  No
Floor Thickness (inches): F	Raised Floor: Yes 🗌 No	
Insulation: Yes  No Insulation Location	n:	Insulation Thickness:
SITE SPECIFICATIONS		
Site Acreage: Additional Acreage Available: Conforms to Present Zoning: Yes  No		Conforms to Present Zoning: Yes  No
Zoning Classification:		
On-Site Parking: Yes No Number of	Free Surface Spaces:	

UTILITIES	
Electric Power	
Name of Primary Supplier:	Name of Secondary Supplier:
Natural Gas	
Name of Supplier:	Distance from Property (feet):
<u>Water</u>	
Water Provider:	Distance from Property (feet):
<u>Sewer</u>	
Sewer Provider:	Distance from Property (feet):
<u>Telecommunications</u>	
Primary Telecommunications Provider:	Distance from Property (feet):
TRANSPORTATION	
<u>Highway</u>	
Name/Route Number of Highway or Street Serving Property:	
Public Transportation	
☐ Bus ☐ Rail ☐ Water	
COMMENTS	