

RETAIL BUILDING DATA SHEET

FIELDS IN RED ARE REQUIRED

LOCATION

Property Name: _____

Street Address: _____

City: _____ Zip Code: _____ Locality: _____

Town: _____ Within Town Corporate Limits: Yes ☐ No ☐

Name/Route Number of Highway or Street Serving Property: _____

CONTACTS

Owner Name: _____ Phone: _____ E-Mail: _____

Number of Owners: _____ Property Ownership: Private ☐ Public ☐ Public-Private ☐

Primary Broker Contact: _____ Phone: _____ E-Mail: _____

Secondary Broker Contact: _____ Phone: _____ E-Mail: _____

PRICING & AVAILABILITY

Multi-Tenant: Yes ☐ No ☐ Building Construction Status: Existing ☐ Proposed ☐ Under Construction ☐

Available for Sale: Yes ☐ No ☐ Sale Price: _____ Investment Property: Yes ☐ No ☐

Lease Options (select all that apply): Lease ☐ Lease/Purchase ☐ Sublease ☐ Lease Type: _____

Minimum Lease Rate (per sq. ft.): _____ Maximum Lease Rate: _____

SPECIFICATIONS

Total Building Space (sq. ft.): _____ Total Available: _____ Maximum Contiguous: _____

Minimum Space Available: _____ Number of Floors: _____

Recent Use: _____

CONSTRUCTION

Construction Type: _____

Construction Year: _____ Year of Additions: _____ LEED Certified: Yes ☐ No ☐

Roof Type: _____ Sprinkler Type: _____

Floor Type: _____ Floor Reinforced: Yes ☐ No ☐ Floor Thickness (inches): _____

SITE SPECIFICATIONS

Site Acreage: _____ Additional Acreage Available: _____ Parking Spaces: _____

Traffic Volume: _____

ZONING

Zoning Classification: _____

Zoning Type (select only one): Agricultural ☐ Commercial ☐ Heavy Industrial ☐ Light Industrial ☐ Mixed Use ☐

Light and Heavy Industrial ☐ Office ☐ Other ☐ Residential ☐ Retail ☐

UTILITIES

Electric Power

Name of Primary Supplier: _____

Name of Secondary Supplier: _____

Natural Gas

Name of Supplier: _____ **Distance from Property (feet):** _____

Line Size (inches): _____

Water

Water Supplier: _____ **Distance from Property (feet):** _____

Name of Secondary Supplier: _____ **Line Size (inches):** _____

Sewer

Sewer Provider: _____ **Distance from Property (feet):** _____

Name of Secondary Supplier: _____ **Line Size (inches):** _____

Fiber/Broadband

Primary Fiber/Broadband Provider: _____

Other Providers: _____

Distance from Property (feet): _____

INCENTIVES

Hub Zone: Yes ☐ No ☐ **New Market Tax Credit Zone:** Yes ☐ No ☐ **Foreign Trade Zone:** Yes ☐ No ☐

Technology Zone: Yes ☐ No ☐

COMMENTS
