|  |  |
| --- | --- |
| U.S. Department  of Transportation  Federal Aviation  Administration | **MARKET RESEARCH – SPACE** |

**Instructions for filling out the Market Research Form**

This form should be used when conducting market research for the acquisition of space to capture general information about the cost and availability of space in the area. This will be used in further Market Analysis and Market Surveys.

A separate form should be filled out for each property considered.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | | | | | | | | DATE | | |
| **I. BUILDING INFORMATION** | | | | | | | | | | | | | |
| 1. BUILDING NAME AND LOCATION | | | | | | | | | | | | | |
| 2. OWNER OR AGENT NAME AND ADDRESS: | | | | | | | | | | | | | |
| 3. TELEPHONE NO. OF OWNER/AGENT:       (              ) | | | | | | | | | | | | | |
| 4. SPACE AVAILABLE – | | | | | | | | | | | | | |
| 4A. TOTAL FLOOR(S) AND SQ. FT IN BUILDING: | | | | | 4B. AMOUNT (Rentable Sq. Ft.)  4C. CONTIGUOUS SPACE? YES / NO | | | | | | | | |
| 5. NEIGHBORHOOD DESCRIPTION: | | | | | | | | | | | | | |
| **II. COMPETITIVE RENTAL RATE AND TERMS** | | | | | | | | | | | | | |
| 6. BASE RENT | 6A. PER ANNUM   $ | | | 6B. PER SQ. FT.  $ | | | | 6C. MEASUREMENT USED FOR RENTAL QUOTE | ***Place PHOTOGRAPH Here (if available)*** | | | | |
| 7A. SERVICES INCLUDED IN BASE RENT | | |  | | --- | | 7B.PARTIAL *(State below what is excluded.)* | | | | | | | |
| 8. TENANT IMPROVEMENTS ALLOWANCE AMOUNT OFFERED WHICH IS NOT INCLUDED IN THE BASE RENTAL AMOUNT ABOVE (6. RENT)  $ | | | | | | | | |
| 9. COMMENTS | | | | | | | | |
| **III. BUILDING DESCRIPTION** | | | | | | | | | | | | | |
| ITEM | | | CONDITION | | | | | | | | | | |
| 10. GENERAL | | | CHECK APPLICABLE CONDITION:  A. NEW \_\_\_\_  B. OLDER, WELL MAINTAINED \_\_\_\_  C. OLDER, POORLY MAINTAINED\_\_\_\_   NOTES: | | | | | | | | | | |
| 11. BUILDING ASSET INFORMATION | | | A. ESTIMATED FMV OF BUILDING TO BE LEASED $\_\_\_\_\_\_\_\_\_\_\_\_\_  B. AGE OF BUILDING \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  C. MAJOR RENOVATION/REFURBISHMENT? (Y/N) \_\_\_\_\_\_\_\_\_ IF Y: DATE OF RENOVATION\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | | | | | | | | | |
| 12. TRANSPORTATION ACCESS | | | A. PARKING AVAILABLE ON SITE | | | | | | | | | YES | NO |
|  |  |
| B. PUBLIC PARKING IN VICINITY | | | | | | | | |  |  |
| C. SERVED BY PUBLIC TRANSPORTATION | | | | | | | | |  |  |
| 13. ELEVATORS | | | A. TYPE | | | | PASSENGER / FREIGHT | | | | |  |  |
| B. CURRENT CERTIFICATE OF INSPECTION | | | | | | | | |  |  |
| 14. HEATING | | | A. TYPE | | | CENTRAL / INDIVIDUAL UNITS | | | | | |  |  |
| B. FUEL | | | OIL / GAS / ELECTRIC / OTHER *(Specify)* | | | | | |  |  |
| 15. AIR CONDITIONING | | | TYPE | | | CENTRAL / INDIVIDUAL WINDOW UNITS | | | | | |  |  |
| 16. ACCESSIBLE TO HANDICAPPED | | | A. ROUTE TO AND WITHIN THE BUILDING | | | | | | | | |  |  |
| B. ENTRANCE AND ELEVATORS | | | | | | | | |  |  |
| C. DRINKING FOUNTAINS AND RESTROOMS | | | | | | | | |  |  |
| **PROPERTY OWNERSHIP:** | | | | | | | | | | **NAME, ADDRESS, AND PHONE NUMBER OF MANAGEMENT COMPANY AND/OR MANAGER OF THE FACILITY:** | | | |