

# LEASE MARKET SURVEY

AGENCY REQUESTING SPACE \_\_\_\_\_ REQUEST NO. \_\_\_\_\_  
 DATE OF SURVEY \_\_\_\_\_  
 SURVEY LOCATION (city, state) \_\_\_\_\_  
 REALTY SPECIALIST \_\_\_\_\_  
 AGENCY REPRESENTATIVE \_\_\_\_\_

TYPE OF SPACE       OFFICE       WAREHOUSE       SPECIAL: \_\_\_\_\_

BUILDING NAME \_\_\_\_\_  
 ADDRESS \_\_\_\_\_  
 OWNER OR AGENT \_\_\_\_\_  
 AVAILABLE RENTABLE SQUARE FOOTAGE \_\_\_\_\_  
 LOCAL MEASUREMENT METHOD \_\_\_\_\_

FLOOR # \_\_\_\_\_ SF \_\_\_\_\_ CAF\* \_\_\_\_\_      FLOOR # \_\_\_\_\_ SF \_\_\_\_\_ CAF\* \_\_\_\_\_  
 FLOOR # \_\_\_\_\_ SF \_\_\_\_\_ CAF\* \_\_\_\_\_      FLOOR # \_\_\_\_\_ SF \_\_\_\_\_ CAF\* \_\_\_\_\_

\*CAF = Common Area Factor

RENTABLE SQUARE FOOT RATE \_\_\_\_\_  
 SERVICES & UTILITIES INCLUDED IN RENT \_\_\_\_\_  
 TENANT IMPROVEMENTS INCLUDED IN RENT \_\_\_\_\_

## I. BUILDING CHARACTERISTICS

1. LOCATION	<input type="checkbox"/> INDUSTRIAL	<input type="checkbox"/> OFFICE PARK	<input type="checkbox"/> RESIDENTIAL	<input type="checkbox"/> COMMERCIAL		
	<input type="checkbox"/> CENTRAL BUSINESS DISTRICT		<input type="checkbox"/> URBAN RENEWAL	<input type="checkbox"/> HISTORIC		
2. APPEARANCE OF STRUCTURE	<input type="checkbox"/> EXCELLENT	<input type="checkbox"/> GOOD	<input type="checkbox"/> FAIR	<input type="checkbox"/> POOR		
3. APPEARANCE OF GROUNDS	<input type="checkbox"/> EXCELLENT	<input type="checkbox"/> GOOD	<input type="checkbox"/> FAIR	<input type="checkbox"/> POOR	<input type="checkbox"/> NOT APPLICABLE	
4. EXTERIOR OF BUILDING DESIGN	<input type="checkbox"/> URBAN	<input type="checkbox"/> OFFICE PARK	<input type="checkbox"/> SUBURBAN	# OF STORIES	_____	
	<input type="checkbox"/> SINGLE-CORE	<input type="checkbox"/> FREE STANDING CONVERSION		BUILDING AGE	_____	
	<input type="checkbox"/> MULTI-CORE	<input type="checkbox"/> ADAPTIVE RE-USE		ORIGINAL USE	_____ <small>(specify)</small>	
4A. FACING MATERIAL	<input type="checkbox"/> BRICK	<input type="checkbox"/> CONCRETE	<input type="checkbox"/> GLASS	<input type="checkbox"/> STEEL	<input type="checkbox"/> MARBLE	<input type="checkbox"/> STONE
	<input type="checkbox"/> OTHER	_____ <small>(specify)</small>				
5. INTERIOR AS IS						
5A. WALLS	<input type="checkbox"/> DRYWALL	<input type="checkbox"/> MASONRY	<input type="checkbox"/> PLASTER	<input type="checkbox"/> OTHER _____ <small>(specify)</small>		
5B. WALL COVERING	<input type="checkbox"/> PAINT	<input type="checkbox"/> PANELING	<input type="checkbox"/> WALLPAPER	<input type="checkbox"/> VINYL		
	<input type="checkbox"/> OTHER	_____ <small>(specify)</small>				
5C. LIGHTING	<input type="checkbox"/> SUSPENDED	<input type="checkbox"/> RECESSED	<input type="checkbox"/> PARABOLIC	<input type="checkbox"/> FLUORESCENT	<input type="checkbox"/> INCANDESCENT	
5D. CEILING	<input type="checkbox"/> HEIGHT WITH TILES	_____		<input type="checkbox"/> HEIGHT SLAB TO SLAB	_____	
	<input type="checkbox"/> SUSPENDED	<input type="checkbox"/> ACOUSTICAL	<input type="checkbox"/> PLASTER	<input type="checkbox"/> UNFINISHED		
	<input type="checkbox"/> OTHER	_____ <small>(specify)</small>				

LEASE MARKET SURVEY OF: \_\_\_\_\_

5E. FLOORS

<input type="checkbox"/>	WOOD	<input type="checkbox"/>	VINYL TILE	<input type="checkbox"/>	CONCRETE	<input type="checkbox"/>	CARPET
<input type="checkbox"/>	OTHER _____ (specify)			<input type="checkbox"/>	FLOOR LOAD _____		

5F. WINDOWS

	<input type="checkbox"/>	NOT APPLICABLE	<input type="checkbox"/>	BARS ON GRADE-LEVEL WINDOWS		
FRAME	<input type="checkbox"/>	WOOD	<input type="checkbox"/>	METAL	<input type="checkbox"/>	OTHER _____ (specify)
TYPE	<input type="checkbox"/>	CASEMENT	<input type="checkbox"/>	FIXED	<input type="checkbox"/>	DOUBLE HUNG <input type="checkbox"/> OTHER _____ (specify)

5G. RESTROOMS

<input type="checkbox"/>	SEPARATE FACILITIES FOR MEN AND WOMEN ON EACH FLOOR	<input type="checkbox"/>	200' OR LESS FROM SPACE (IF REQ. OVER 10,000 SF)					
ADEQUATE FIXTURES AND ACCESSORIES	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO _____ (explain)				
MEN	<input type="checkbox"/>	STALL	<input type="checkbox"/>	LAVATORY	<input type="checkbox"/>	MIRROR	<input type="checkbox"/>	URINAL
WOMEN	<input type="checkbox"/>	STALL	<input type="checkbox"/>	LAVATORY	<input type="checkbox"/>	MIRROR		
HANDICAPPED ACCESSIBILITY	<input type="checkbox"/>	COMMON FACILITIES ACCESSIBLE	<input type="checkbox"/>	SEPARATE FACILITY ACCESSIBLE	<input type="checkbox"/>	NO		
<input type="checkbox"/>	DOOR IDENTIFICATION	<input type="checkbox"/>	AUTOMATIC DOOR OPENERS	<input type="checkbox"/>	CAN BE ALTERED TO MEET REQUIREMENTS			

5H. DRINKING FOUNTAINS

<input type="checkbox"/>	# PER FLOOR _____	<input type="checkbox"/>	150' OR LESS FROM SPACE (IF REQ. OVER 10,000 SF)			
HANDICAPPED ACCESSIBILITY	<input type="checkbox"/>	SUFFICIENT	<input type="checkbox"/>	INSUFFICIENT	<input type="checkbox"/>	CAN BE ALTERED

5I. ELEVATORS

<input type="checkbox"/>	NOT APPLICABLE							
TYPE	<input type="checkbox"/>	MANUAL	<input type="checkbox"/>	AUTOMATIC				
NUMBER	<input type="checkbox"/>	PASSENGER _____	<input type="checkbox"/>	FREIGHT _____				
	<input type="checkbox"/>	DIMENSIONS _____ (specify)	<input type="checkbox"/>	DIMENSIONS _____ (specify)				
FIRE SAFETY	<input type="checkbox"/>	AUTOMATIC RECALL	<input type="checkbox"/>	MANUAL RECALL	<input type="checkbox"/>	FIRE SAFETY SIGNS	<input type="checkbox"/>	TELEPHONE

5J. HANDICAPPED

ACCESSIBLE	<input type="checkbox"/>	RAMPS/WALKS	<input type="checkbox"/>	CAN BE ALTERED	<input type="checkbox"/>	NO
	<input type="checkbox"/>	CURBS	<input type="checkbox"/>	CAN BE ALTERED	<input type="checkbox"/>	NO
	<input type="checkbox"/>	PARKING SPACES	<input type="checkbox"/>	CAN BE ARRANGED	<input type="checkbox"/>	NO
	<input type="checkbox"/>	ELEVATORS	<input type="checkbox"/>	CAN BE ALTERED	<input type="checkbox"/>	NO
	<input type="checkbox"/>	STAIRWELLS	<input type="checkbox"/>	CAN BE ALTERED	<input type="checkbox"/>	NO
MISC.	<input type="checkbox"/>	PUBLIC TELEPHONES	<input type="checkbox"/>	AUTOMATIC DOOR OPENERS (note: less than 54" from floor)		
OWNER WILL CONFORM TO SFO HANDICAPPED REQUIREMENTS	<input type="checkbox"/>	YES	<input type="checkbox"/>	NO	<input type="checkbox"/>	UNKNOWN

6. BUILDING SYSTEMS

6A. HEATING

TYPE	<input type="checkbox"/>	WARM AIR	<input type="checkbox"/>	HOT AIR	<input type="checkbox"/>	HOT WATER	<input type="checkbox"/>	STEAM		
FUEL	<input type="checkbox"/>	GAS	<input type="checkbox"/>	ELECTRIC	<input type="checkbox"/>	OIL	<input type="checkbox"/>	GEO THERMAL	<input type="checkbox"/>	SOLAR
	<input type="checkbox"/>	OTHER _____ (specify)								

6B. AIR CONDITIONING

TYPE	<input type="checkbox"/>	CENTRAL	<input type="checkbox"/>	WINDOW	<input type="checkbox"/>	PACKAGE	<input type="checkbox"/>	NOT AVAILABLE
FUEL	<input type="checkbox"/>	GAS	<input type="checkbox"/>	ELECTRIC	<input type="checkbox"/>	SOLAR	<input type="checkbox"/>	OTHER _____ (specify)

6C. SYSTEM ZONING

<input type="checkbox"/>	BY FLOOR	<input type="checkbox"/>	VERTICAL	<input type="checkbox"/>	HORIZONTAL	<input type="checkbox"/>	ENTIRE BUILDING	<input type="checkbox"/>	INDIVIDUAL TENANT
<input type="checkbox"/>	MULTIPLE PER FLOOR	<input type="checkbox"/>	INDEPENDENT HVAC CONTROL						
<input type="checkbox"/>	INDIVIDUAL PERIMETER CONTROL	<input type="checkbox"/>	INTERIOR/EXTERIOR PERIMETER CONTROL						

LEASE MARKET SURVEY OF: \_\_\_\_\_

6D. POWER DISTRIBUTION	<input type="checkbox"/>	PERMANENT WALL FIXTURES	<input type="checkbox"/>	ON FLOOR	<input type="checkbox"/>	ELECTRICAL CELLULAR DECK				
	<input type="checkbox"/>	UNDER FLOOR SYSTEM	<input type="checkbox"/>	ABOVE CEILING	<input type="checkbox"/>	RAISED FLOOR	<input type="checkbox"/>	FLAT CONDUCTOR CABLE		
7. FIRE SAFETY AND HEALTH										
7A. SECURITY	<input type="checkbox"/>	NO PROVISIONS	<input type="checkbox"/>	SECURE BUILDING	<input type="checkbox"/>	GUARD IN LOBBY	<input type="checkbox"/>	ALARM SYSTEM		
	<input type="checkbox"/>	CONTROLLED GARAGE ENTRY	<input type="checkbox"/>	CONTROLLED ENTRY	<input type="checkbox"/>	CARD KEY SYSTEM				
	<input type="checkbox"/>	ELEVATOR CONTROL (LOCKOFF)	<input type="checkbox"/>	24-HR. GUARD SERVICE	<input type="checkbox"/>	BALCONIES/PATIOS ADJACENT TO SPACE				
7B. EMERGENCY ILLUMINATION	<input type="checkbox"/>	OFFICE SPACE	<input type="checkbox"/>	CORRIDORS	<input type="checkbox"/>	BUILDING EXTERIOR	<input type="checkbox"/>	STAIRWAYS	<input type="checkbox"/>	EXIT LIGHTS IN CORRIDORS
7C. GENERAL	<input type="checkbox"/>	FIRE RESISTIVE CONSTRUCTION	<input type="checkbox"/>	TYPE I	<input type="checkbox"/>	TYPE II				
	<input type="checkbox"/>	PROTECTED NON-COMBUSTIBLE	<input type="checkbox"/>	EXITS WITHIN _____ FT. OF SPACE						
	<input type="checkbox"/>	UNPROTECTED NON-COMBUSTIBLE	<input type="checkbox"/>	EXTERIOR DOORS OPEN OUTWARD	<input type="checkbox"/>	EXTERIOR AUTO DOOR OPENERS				
7D. STAIRWELLS	<input type="checkbox"/>	STAIRWELL DOOR LATCHES	<input type="checkbox"/>	DOORS CLOSE AUTOMATICALLY						
	<input type="checkbox"/>	DISCHARGE OUTSIDE	<input type="checkbox"/>	DISCHARGE INTO GARAGE	<input type="checkbox"/>	TWO SEPARATE EXITS				
	<input type="checkbox"/>	HANDRAILS	<input type="checkbox"/>	SAFETY STRIPPING	<input type="checkbox"/>	STAIRWELL	_____ FT. FROM SPACE			
		TYPE	<input type="checkbox"/>	SCISSORS	<input type="checkbox"/>	OPEN	<input type="checkbox"/>	CLOSED		
7E. FIRE SAFETY	<input type="checkbox"/>	SMOKE DETECTORS	<input type="checkbox"/>	SPRINKLER SYSTEM	<input type="checkbox"/>	STANDPIPES IN STAIRWELLS	<input type="checkbox"/>	FIRE EXTINGUISHERS		
	<input type="checkbox"/>	MANUAL FIRE ALARM	<input type="checkbox"/>	AUTOMATIC FIRE ALARM	<input type="checkbox"/>	CENTRAL MONITORING OF ALARM SYSTEM				
7F. ASBESTOS/PCB'S	<input type="checkbox"/>	FRIABLE	<input type="checkbox"/>	NON-FRIABLE	<input type="checkbox"/>	LOCATION (specify)				
	<input type="checkbox"/>	CONTAINED	<input type="checkbox"/>	PCB'S	<input type="checkbox"/>	HAZARDOUS WASTE SITE				
8. PARKING	OFFICIAL	<input type="checkbox"/>	INSIDE	<input type="checkbox"/>	OUTSIDE	<input type="checkbox"/>	NONE			
		<input type="checkbox"/>	# AVAILABLE _____	<input type="checkbox"/>	RENT PER SPACE _____					
	EMPLOYEE	<input type="checkbox"/>	INSIDE	<input type="checkbox"/>	OUTSIDE	<input type="checkbox"/>	NONE			
		<input type="checkbox"/>	# AVAILABLE _____	<input type="checkbox"/>	RENT PER SPACE _____					
9. LOADING DOCK	<input type="checkbox"/>	NOT APPLICABLE	<input type="checkbox"/>	INTERIOR	<input type="checkbox"/>	EXTERIOR	<input type="checkbox"/>	LOAD LEVELER	<input type="checkbox"/>	WEATHER PROTECTION
	<input type="checkbox"/>	PLATFORM AVAILABLE	<input type="checkbox"/>	18-WHEELER ACCESSIBLE						

**II. ASKING PRICE**

YEARLY RENT PER \_\_\_\_\_ SQUARE FOOT \_\_\_\_\_  
(usable/occupiable/rentable)

FULLY SERVICED  PARTIALLY SERVICED \_\_\_\_\_  
(explain)

ALTERATIONS INCLUDED  ESTIMATED COST OF SERVICES \_\_\_\_\_ PER \_\_\_\_\_

ESCALATIONS INCLUDED  ESTIMATED COST OF UTILITIES \_\_\_\_\_ PER \_\_\_\_\_

LEASE MARKET SURVEY OF: \_\_\_\_\_

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**III. COMMENTS**

- EMPLOYEE PARKING WITHIN \_\_\_\_\_ BLOCKS
- PUBLIC TRANSIT WITHIN \_\_\_\_\_ BLOCKS
- EATING FACILITIES WITHIN \_\_\_\_\_ BLOCKS
- EMPLOYEE SERVICES WITHIN \_\_\_\_\_ BLOCKS

REMARKS

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**IV. DECISION TO SOLICIT**

- THIS BUILDING WILL BE SOLICITED. IT MEETS OR IS CAPABLE OF MEETING THE SFO STANDARDS.
- THIS BUILDING WILL NOT BE SOLICITED. IT DOES NOT MEET OR IS NOT CAPABLE OF MEETING THE SFO STANDARDS FOR THE FOLLOWING REASONS:

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**THE CLIENT AGENCY REPRESENTATIVE PRESENT ON THE MARKET SURVEY**

- AGREES WITH THE ABOVE DECISION
- DOES NOT AGREE WITH THE ABOVE DECISION FOR THE FOLLOWING REASONS:

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\_\_\_\_\_  
SIGNATURE OF AUTHORIZED AGENCY REPRESENTATIVE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
SIGNATURE OF PERSON CONDUCTING SURVEY

\_\_\_\_\_  
DATE