

PROPOSAL TO LEASE SPACE (For use with TI SFO and/or National Broker Contract)		IN RESPONSE TO SOLICITATION NUMBER →		VA260-17-R-0019		DATED	
SECTION I - DESCRIPTION OF PREMISES							
1a. BUILDING NAME				1b. BUILDING ADDRESS			
1c. CITY			1d. STATE	1e. 9-DIGIT ZIP CODE		1f. CONGRESSIONAL DISTRICT	
2a. FLOORS OFFERED	2b. TOTAL NUMBER OF FLOORS IN BUILDING	3. TOTAL RENTABLE SPACE IN OFFERED BUILDING					
		a. GENERAL PURPOSE (Office) sq. ft.		b. WAREHOUSE sq. ft.		c. OTHER sq. ft.	
4. LIVE FLOOR LOAD lbs. / sq. ft.	5. MEASUREMENT METHOD ANSI/BOMA <input type="checkbox"/> OTHER <input type="checkbox"/>	6. YEAR OF LAST MAJOR RENOVATION (If applicable)		7. BUILDING AGE		8. SITE SIZE sq. ft. acres	
SECTION II - SPACE OFFERED AND RATES							
9. ANSI/BOMA OFFICE AREA SQUARE FEET (ABOA)		10. RENTABLE SQUARE FEET (RSF)			11. COMMON AREA FACTOR (CAF)		
<p>"Tenant Improvements" are all alterations for the Government-demised area above the building shell buildout, excluding costs identified as tenant improvements in the Security Unit Price List. Building-Specific Security is the sum of costs identified as such in the Security Unit Price List. Neither the Tenant Improvements as stated in Block 12, nor the Building-Specific Security as stated in Block 13, are to be included in the shell rent. It is expected that the tenant buildout will be fully amortized at the end of the firm term, and the rent will be reduced accordingly. Any desired rent increases or decreases beyond the firm term of the lease should be reflected in the shell rate and fully explained as part of this written proposal. If Tenant Improvements or Building-Specific Security improvements are to be amortized beyond the firm term, those calculations must be itemized as part of this written proposal. The Offeror may attach additional pages as necessary.</p>							
Offerors may copy this section through lines 18 as needed. Insert them above Box 20 or in Box 29.						Number of years each cost per RSF is in effect. State any changes for any rent component.	
	a. BUILD-OUT COSTS PER CATEGORY	b. AMORTIZATION TERM	c. AMORTIZATION (%)	d. AMORTIZED COST PER RSF	e. AMORTIZED COST PER ABOA SF	f. NO. YEARS RATE IS EFFECTIVE	
12. TENANT IMPROVEMENTS (per SFO requirements)							
13. BUILDING-SPECIFIC SECURITY (per SFO requirements detailed on Security Unit Price List)							
14. SHELL BUILD-OUT (per SFO requirements)							
15. TOTAL BUILD-OUT COSTS							
16. SHELL RENT (Including current real estate taxes. Refer to Line 28 on GSA Form 1217)							
17. OPERATING COSTS (Refer to Line 27 on GSA Form 1217)							
18. TOTAL ANNUAL RATE							
19. TOTAL ANNUAL RENT							
	PER ANNUM RENT	FOR YEARS	PER ANNUM RENT	FOR YEARS	PER ANNUM RENT	FOR YEARS	
TOTAL ANNUAL STEP RENTS	\$ _____ RSF \$ _____ ABOA	_____ Thru _____	\$ _____ RSF \$ _____ ABOA	_____ Thru _____	\$ _____ RSF \$ _____ ABOA	_____ Thru _____	
20.	a. Number of parking spaces for the entire building/facility, which are under the control of the Offeror: surface structured b. Number of parking spaces required by local code: surface structured c. Number of parking spaces for Employee/Visitor Use (per SFO): surface structured d. Number of parking spaces for Official Government Vehicles (per SFO): surface structured e. Does the rental rate offered above include SFO-required parking costs? YES <input type="checkbox"/> NO <input type="checkbox"/> If NO, complete the following: Annual cost per space: \$ surface structured						

SECTION III - LEASE TERMS AND CONDITIONS

21. INITIAL LEASE TERM (Full Term)			22. RENEWAL OPTIONS			
a. Number of years	b. Years firm	c. Number of days notice for Government to terminate lease:	a. Shell rate / RSF / Yr	b. Years each	c. Number of options	d. Number of days NOTICE to exercise renewal option:
23. OFFER GOOD UNTIL AWARD (In accordance with Federal Acquisition Regulations 15.208)			24. Space will be altered and delivered in accordance with the Government's specifications and requirements in accordance with the Solicitation for Offers and any additional attachments.			
25. COMMISSIONS -- IF APPLICABLE, ATTACH COMMISSION AGREEMENT						
a. Tenant Representative Commission:		b. Owner's Representative Commission:		c. Schedule of Commission payments:		
%		%		% at lease award and % at lease occupancy		
26. OFFEROR'S TENANT IMPROVEMENT FEE SCHEDULE a. General Conditions will be _____ percent of (choose one): <input type="checkbox"/> 1. Total Subcontractors Costs estimated to be \$ <input type="checkbox"/> 2. Other (state basis) \$ b. General Contractor's fee will be _____ percent of (choose one): <input type="checkbox"/> 1. Total Subcontractors Costs estimated to be \$ <input type="checkbox"/> 2. Other (state basis) \$ c. Architectural/Engineering fees will be (choose one): <input type="checkbox"/> 1. \$ _____ per usable square foot <input type="checkbox"/> 2. _____ % of (state basis) \$ <input type="checkbox"/> 3. \$ _____ flat fee d. Lessor's Project Management fees will be _____ percent of (choose one): <input type="checkbox"/> 1. Total Subcontractors Costs estimated to be \$ <input type="checkbox"/> 2. Total Subcontractors Costs plus (add basis): \$ e. If other fees are applicable, state what they are in terms of a per usable square foot amount, or if using a percentage, what is the basis for determining the fee. The Government will add the cost of the proposed fees to the net present value of the offered rental rate as described in the SFO's Price Evaluation paragraph. This schedule will be applicable for Tenant Improvements, Building-Specific Security, and change orders during initial construction arising under any resulting lease contract.			27. ADDITIONAL FINANCIAL ASPECTS OF THE OFFER Adjustment for Vacant Premises: \$ _____ per ABOA sf HVAC Overtime Rate: \$ _____ per _____ Areas requiring 24 hour HVAC (LAN, etc.) \$ _____ per _____ sf NOTE: THE COST TO PROVIDE 24 HOUR HVAC SERVICE IS REIMBURSED SEPARATELY FROM RENT. THE COST FOR THESE OVERTIME UTILITIES MUST NOT BE INCLUDED IN THE OFFERED RENTAL RATE OR BASE OPERATING COSTS. Building's Normal Hours of HVAC Operation: Mon - Fri AM to PM; Saturday AM to PM; Sunday AM to PM; Percent of Government Occupancy: % Current Year Taxes: \$ _____ Based on fully assessed value? <input type="checkbox"/> YES <input type="checkbox"/> NO Is the offered space part of multiple tax bills? <input type="checkbox"/> YES <input type="checkbox"/> NO If so, provide tax ID numbers and square footage for each. Attach the legal description of the offered property. If a site is offered, state the total land costs: \$ _____			
29. ADDITIONAL REMARKS OR CONDITIONS WITH RESPECT TO THIS OFFER 			28. LIST OF ATTACHMENTS SUBMITTED WITH THIS OFFER (See Solicitation requirements)			

SECTION IV - OWNER IDENTIFICATION AND CERTIFICATION

30. RECORDED OWNER (Name and address including ZIP code)			
31. BY SUBMITTING THIS OFFER, THE OFFEROR AGREES UPON ACCEPTANCE OF THIS PROPOSAL BY THE HEREIN SPECIFIED DATE, TO LEASE TO THE UNITED STATES OF AMERICA, THE PREMISES DESCRIBED, UPON THE TERMS AND CONDITIONS AS SPECIFIED HEREIN, IN FULL COMPLIANCE WITH AND ACCEPTANCE OF THE AFOREMENTIONED SOLICITATION FOR OFFERS, WITH ATTACHMENTS.			
32. OFFEROR'S INTEREST IN PROPERTY	OWNER <input type="checkbox"/>	AGENT <input type="checkbox"/>	OTHER (Specify):
33. OFFEROR			
a.	b. E-MAIL ADDRESS		
	c. TELEPHONE NUMBER (Including area code) extension		
d. SIGNATURE	e. DATE SIGNED		