

RETAIL BUILDING DATA SHEET

FIELDS IN RED ARE REQUIRED

LOCATION

Property Name: _____

Street Address: _____

City: _____ Zip Code: _____ Locality: _____

Within Corporate Limits: Yes No

Shopping Center _____

Virginia Enterprise Zone: Yes No Technology Zone: Yes No Foreign Trade Zone: Yes No

Hub Zone: Yes No New Market Tax Credit Zone: Yes No

OWNERSHIP

Available for Lease: Yes No Available for Lease/Purchase: Yes No Lease Type: _____

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

Available for Sale: Yes No Sale Price: _____ Publicly Owned: Yes No Date Available: _____

Owner: _____ Phone: _____ E-Mail: _____

Contact: _____ Phone: _____ Mobile: _____

E-Mail: _____

Submitted By: _____ Date Submitted: _____

SPECIFICATIONS

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

Contiguous To Floor: _____ Contiguous to Suite: _____ Total Space Per Floor: _____

Office: _____ Retail: _____ Other: _____

Minimum Space Available: _____ Number of Floors: _____

Ceiling Height: _____ Multi-Tenant: Yes No LEED Certified: Yes No Date Vacated: _____

Recent Use: _____

CONSTRUCTION

Construction Type: _____

Construction Year: _____ Year of Additions: _____ Roof Type: _____

Sprinkler Type: _____ Floor Type: _____ Floor Reinforced: Yes No

Floor Thickness (inches): _____ Raised Floor: Yes No

Insulation: Yes No Insulation Location: _____ Insulation Thickness: _____

SITE SPECIFICATIONS

Site Acreage: _____ Additional Acreage Available: _____ Conforms to Present Zoning: Yes No

Zoning Classification: _____

Zoning Restrictions: _____

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): _____

Water

Water Provider: _____ Distance from Property (feet): _____

Sewer

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

Telecommunications

Primary Telecommunications Provider: _____

TRANSPORTATION

Highway

Distance to Nearest Interstate Interchange (miles): _____ Interstate: _____

Interchange Name/Exit Number: _____

Distance to Nearest 4-Lane Arterial (miles): _____ Arterial Name/Route Number: _____

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

Air

Distance to Commercial Airport (miles): _____ Airport Name: _____

Distance to General Aviation Airport: _____ Airport Name: _____

Public Transportation

Bus Rail Water

COMMENTS
