



**STATE BUILDINGS AND REAL ESTATE PROGRAMS
SPACE REQUEST FORM (“SRF”)**

For Expanding Space, Reducing Space, obtaining New Leased Space, or any other Real Estate Acquisition

Please complete this SRF and return it to the Office of the State Architect, Real Estate Programs.
For questions, please email: Cameron Kennedy cameron.kennedy@state.co.us or Jennifer Threlkeld jennifer.threlkeld@state.co.us

Agency / Institution: _____

Submittal Date: _____

Program Contact:	Procurement Contact:	Budget Contact:
Name:	Name:	Name:
Telephone:	Telephone:	Telephone:
Email:	Email:	Email:

Current Facility:

Address: _____ Use: _____
 Lease expiration date: _____ Rentable Square Feet: _____
 Annual Rent: _____ Current base rent (if known): _____
 Renewal Notice deadline?: _____
 Current Head Count: _____

Are there any additional expenses beyond base rent? _____
 (Include any amounts such as operating expenses or additional negotiated terms to the agreement.)

Reason for Request (check all that apply):

Renewal Expansion Reduction Relocation New Purchase New Lease

Use: Office Warehouse Industrial Other: _____

Rentable Square Feet Needed: _____

Desired Lease Term: # of Years/Months: _____

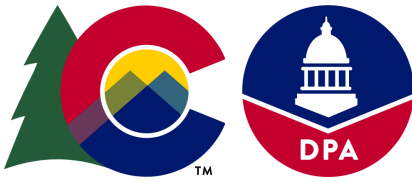
Estimated Occupancy Date: _____

Type of Parking Required: Employee Public Reserved (Only State Fleet Vehicle parking can be paid through the lease)

Do you need Electronic Vehicle charging stations for State Use: Yes No

(If the infrastructure does not exist, it should be included in tenant improvements)

Mass Transit Requirement: Bus Rail Other: _____



Space Planning:

Has a program plan been completed? Yes No (If so, please attach it.)

Has Statewide Planning been contacted regarding your space needs? Yes No (Institutions of Higher education are excluded.)

Budgeted Amount by Program:

Yearly budgeted total rent amount (can be shown as a range): _____

Source of Funding: State ____ Federal ____ Grant ____ Other: ____ (Provide category percentages if more than one type)

Has an annual appropriation for the entire term been accounted for? Yes No

Have budgeted funds been allocated for relocation costs: Yes No N/A

(Examples include: relocation costs, furniture, IT, cabling)

Colocation Possibilities:

Does the program have any unique requirements or needs that would prevent it from colocating with another Agency or Institution of Higher Education? Yes No

If yes, please explain: _____

Does the program have any other requirements for the area the Agency/Institution intends to occupy? Yes No

If yes, please explain: _____

Please attach any additional pages of explanation or forms for special requirements (e.g., planning documents)