

VIRGINIASCAN OFFICE BUILDING DATA SHEET

FIELDS IN RED ARE REQUIRED

LOCATION

Property Name: _____

Street Address: _____

City: _____ Zip Code: _____ Locality: _____

Within Corporate Limits: Yes No

Research Park _____

Office Park _____

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: _____ Total Space Per Floor: _____ Office: _____

Other: _____ Minimum Space Available: _____ Number of Floors: _____

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

Heat: _____ A/C: _____ 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 Employee Parking Spaces: _____

FEATURES

Call Center

Call Center: Yes No Call Center Space (sq. ft.): _____ Number of Workstations: _____

Plug and Play: Yes No

Data Center

Data Center: Yes No Data Center Space (sq. ft.): _____

Clean Room

Available: Yes No Space (sq. ft.): _____ Class: _____

Lab Space

Lab Type: _____ Lab Space (sq. ft.): _____ Number of Labs: _____

Most Recent Use of Space: _____ Construction Year: _____

Year of Additions: _____ Existing Equipment: _____

Shared Services: _____ Additional Fit-Out Required: Yes No

Time Needed for Fit-Out: _____ Lease Rate (per sq. ft.): _____

Other

Computer Room: Yes No Other Features: _____

UTILITIES

Electric Power

Name of Primary Supplier: _____ **Name of Secondary Supplier:** _____

Redundant: Yes No Voltage: _____ Phase: _____ Amps: _____ Electric UPS: Yes No Generator: Yes No

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: _____

Other Providers: _____

Fiber: Yes No **Distance to Fiber (feet):** _____ Redundant Routes: Yes No

Wireless Broadband: Yes No Sonet Ring: Yes No

Other: _____

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

To be included in our VirginiaScan sites and buildings search system, a valid street address or nearest street intersection **must** be provided. If a valid street address is not available, an aerial photograph or tax map showing the location of the building **must** be provided. Color photographs of the exterior and interior of the building should also be included, as well as any available floor plans, site plans, etc. Digital images are welcome and may be e-mailed to mmende@yesvirginia.org. This form should be returned to:

VIRGINIA ECONOMIC DEVELOPMENT PARTNERSHIP

RESEARCH DIVISION

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