LEASING INFORMATION REQUEST INSTRUCTIONS (PWD 500i)

A. When Used

This form is prepared by the requesting State agency to justify and document information to lease office space.

B. General

DO NOT NEGOTIATE, MAKE OFFER, OR DISCUSS AVAILABLE LEASE FUNDING WITH THE LESSOR OR THE AGENT. Call DAGS Leasing Services Branch to get estimated monthly breakdown of rent. DAGS Leasing Branch will consider any requested lease location but may pursue other alternatives.

Space authorization per employee is generally based upon the salary range (SR level) of the position. A current, Budget & Finance approved Department Organizational and Position Organization Chart (Org Chart) must be submitted with the request.

DAGS Office Space Standards require that a justification must be submitted with the request for miscellaneous or operational support areas such as reception, conference, storage and libraries.

If the Type of Request (Item # 10) is Renewal or Exercise Option, completion of items #11 - 15, 21 - 22 and 28 - 31 are optional, unless there have been changes.

The Leasing Information Request form (PWD 500) along with Space Comp Form 501, the Org Chart, justifications, and any other attachments should be printed, and submitted with any necessary supplementary forms (i.e., HRD-1, BJ Details) under cover memorandum (Office Space Request) from your department director to:

Comptroller DAGS Kalanimoku Building, Room 412

C. Preparation of Form: (Input the Date of this form)

REQUESTING AGENCY INFORMATION

- 1. 6. DEPT/DIVISION/BRANCH/SECTION/UNIT/SUB-UNIT. Self Explanatory.
- 7. CONTACT NAME. The name of the person to contact regarding the information in the request.
- 8. 9. EMAIL ADDRESS & PHONE: The email and work phone number including extension of the contact person.

OFFICE GENERAL REQUIREMENT

10. Type of Request:

<u>NEW LEASE</u>. Select this when you have no current lease and you are requesting a lease for the first time, also, when you are requesting to move from State-owned space to lease space.

RENEWAL. When extending the lease term for your existing office lease.

<u>RELOCATION</u>. When requesting to move from an existing lease space to another lease location (Note: Your department will be responsible for related moving expenses.)

<u>EXPANSION</u>. When requesting additional lease space than you were previously assigned for your current lease due to an increase in staffing or operational requirements. (Note: Your department will be responsible for 100% of the lease cost for any authorized expansion space.)

EXERCISE OPTION TO EXTEND. When requesting DAG to exercise an option to extend the term of your lease for a specific period of time, as permitted under the lease. Rent for the option period may be stated under the lease, or to be negotiated by DAGS.

- 11. AVERAGE NUMBER OF VISITORS. If you provide a service to the public or to other State agencies, identify the average number of visitors per day.
- 12. Size of Office. The total square foot area that you are requesting to be leased for your agency.
- 13. AGENCY GEOGRAPHICAL SERVICE AREA. Area, district, island(s) that program services.
- 14. Type of Agency Services Provided. Identified in program's functional statement.
- 15. SPECIAL OFFICE REQUIREMENTS AND TENANT IMPROVEMENTS. Identify special improvements unique to your operations or function (i.e., heavy vaults or high density filing systems requiring reinforced floorings, security for program, 24/7 air conditioning).

SPACE NEED COMPUTATION

- 16. REQUIRED FORMS. Space Comp Form 501 and Departmental Organization and Position Organization (Org Chart) approved by B&F.
- 17. SUPPLEMENTARY FORMS. If positions listed on Form 501 are not reflected on the B&F approved Departmental Organization and Position Organization Chart (Org Chart), then provide evidence of position approval and funding such as HRD-1 (Position Action Form), BJ Details (Budget Table BJ) or any appropriate approvals as determined by current and applicable Budget Execution Policies and Instructions.

TERM OF LEASE

- 18. TERM OF LEASE. DAGS leases typically run for an initial term of approximately five (5) years. Indicate the desired start and end date of the lease term.
- 19. RENEWAL OPTIONS. Select either the YES or NO, not both, to indicate if you would like DAGS to negotiate lease renewal options. If YES, enter the number of years for the option.

20. OTHER REQUIREMENTS. Identify any other operational or functional requirements or limitations of the agency (i.e. proximity to bus line desirable).

PARKING

- 21. DEPARTMENT VEHICLES REQUIRING OVERNIGHT PARKING. The number of parking stalls for State vehicles assigned to the requesting department that the lessor must provide for lease to the State.
- 22. EMPLOYEE VEHICLE PARKING DESIRED. The number of parking stalls that the lessor is making available for lease directly to employees of the agency for personal use.

ANNUAL COST AND FUNDING DATA

23. PAY To.

LESSOR: The amount of money in each category that is to be paid to the Lessor.

<u>BASE RENT</u>. The fixed or minimum rent that the lessor is requesting per year. This does not include any costs that are included in any other categories below.

GENERAL EXCISE TAX (GET). General Excise Tax that Lessor is charging per year (currently Oahu = 4.712%; Other Islands 4.166%).

<u>COMMON AREA MAINTENANCE (CAM)</u>. Also, referred to as Operating Costs and Utilities. The office's prorated share of the property's maintenance cost.

ELECTRICITY. The electricity cost for the interior of the lease space.

WATER/SEWER The prorated cost for water and sewer services for the lease space.

CUSTODIAL. The cost for cleaning the interior of the lease space.

DEPT PARKING. The cost of parking for State vehicles.

PROPERTY TAX. The prorated share of the real property tax for the lease space.

<u>OTHER COSTS</u>. Any other costs for the lease space that are not included in the cost categories mentioned above (i.e., cost for air conditioning maintenance service).

OTHERS: Identify the above mentioned costs for the lease space that are paid to vendors or service providers, not to the Lessor.

24. GRAND TOTAL PER YEAR PAID TO LESSOR. This field is automatically calculated as the sum of the fields shown on the Lessor line in Item #23.

- 25. GRAND TOTAL PER YEAR PAID TO OTHERS (SERVICE PROVIDERS). This field is automatically calculated as the sum of the fields shown on the Others line in Item #23.
- 26. DEPARTMENT'S TENANT IMPROVEMENT (TI) CONTRIBUTION. If applicable, identify the approximate T.I. contribution (one time cost) that your department can pay. Contact DAGS Leasing Services Branch for this.

SOURCE OF FUNDS

27. SYMBOL/DEPT/DAGS/TOTAL/OTHER ADDITIONAL INFORMATION:

SYMBOL. Indicate the related by symbol for the means of financing shown in the left column (General, Special, and Federal).

DEPT Pays and DAGS Pays columns. Enter the amount of annual leasing costs your DEPT and/or DAGS will be responsible to pay. (Note: For any expansion of an existing lease, your DEPT will be responsible for 100% of leasing costs related to the expansion space.)

TOTAL. The amounts in this column are automatically calculated for each means of financing. For example, the amount that appears in the total column for "General" line is the sum of the amounts on the same line shown under the DEPT and DAGS columns. The Grand Total of all funding by your DEPT and/or DAGS should equal the total of Items #24 & 25.

REQUESTED LOCATIONS FOR DAGS CONSIDERATION

USE THE SPACE PROVIDED ON LINES A AND B TO LIST OTHER BUILDINGS OR LOCATIONS THAT THE PROGRAM IS INTERESTED IN LEASING. DO NOT CALL LESSOR OR LESSOR'S AGENT.

- 28. BUILDING NAME. The name of building or location of the property.
- 29. BUILDING ADDRESS. The address of the building identified under Item #28.

MISCELLANEOUS INFORMATION

- 30. Present Location where Personnel are currently Housed. The current location of the agency's office.
- 31. LOCATION IS STATE SPACE. Select either YES or NO, not both. If the agency will be moving from a DAGS controlled State facility, the space will revert back automatically to DAGS, Public Works Division, Planning Branch for reassignment.
- 32. ADDITIONAL POSITIONS, EQUIPMENT OR OFFICE FURNISHINGS ARE PROJECTED DURING LEASE PERIOD. Select either YES or NO, not both, to indicate if more positions, equipment, or office furnishing are projected during the lease period. If so, indicate how additional space needs will be met.

33.	Assignment to a State facility is anticipated during the term of the lease. Select either
55.	YES or NO, not both, to indicate that the agency anticipates it will move to a State facility during the lease period. If so, include the location and placement date.