

REQUEST FOR BUDGET APPROVAL OF LEASE ACTION

DGS CONTROL NO. _____

TO (IN TURN)
 A. DIRECTOR, BUREAU OF REAL ESTATE
 DEPARTMENT OF GENERAL SERVICES

B. OFFICE OF THE BUDGET

DATE _____

Request necessary budget approvals for the negotiation of a new lease, lease renewal, or alterations for rental of real estate to accommodate the

_____ of the _____
(SPECIFIC OFFICE, I.E. BUREAU, UNIT, ETC.) (DEPARTMENT, BOARD OR COMMISSION)

The following data and justification is offered for your review and consideration.

	LEASEHOLD IMPROVEMENTS	AMENDMENT	RENEWAL OF LEASE	WITH ADDED SPACE			
TYPE OF TRANSACTION	REPLACES EXISTING LEASE			WITH COST INCREASE			
NEW LEASE							
SPECIFIC DATA AND JUSTIFICATION	LEASE DATA		NEW OR PROPOSED LEASE		CURRENT OR EXISTING LEASE		
	LESSOR: NAME(S), COMPLETE ADDRESS (CITY, TOWN, COUNTY, ETC.)						
	FED. I.D. OR SOC. SEC. NO.						
	LOCATION OF PROPERTY: COMPLETE ADDRESS - TWP/BORO - IF RURAL, ATTACH MAP OR SKETCH						
	LEASE #:						
	EFFECTIVE DATE OF NEW LEASE						
	EXPIRATION DATE OF CURRENT LEASE						
	TERM OF LEASE: RENEWAL CLAUSE AND OPTIONS						
	PURPOSE OR USE: (INCLUDE NUMBER OF CURRENT AND TOTAL EMPLOYEES TO USE FACILITY)						
	APPROVED SPACE ALLOCATION		DATE _____	SQ. FT. _____	DATE _____	SQ. FT. _____	
		FOR _____	EMPLOYEES	FOR _____	EMPLOYEES		
SQUARE FEET OF SPACE							
ANNUAL COST PER SQUARE FEET							
BUILDING SERVICES		HEAT _____	ELECTRICITY _____	WATER _____	HEAT _____	ELECTRICITY _____	WATER _____
		GAS _____	JANITORIAL SERVICE AND SUPPLIES _____		GAS _____	JANITORIAL SERVICE AND SUPPLIES _____	
		AIR CONDITIONING _____	PARKING FOR _____		AIR CONDITIONING _____	PARKING FOR _____	
		OTHER _____	CARS _____		OTHER _____	CARS _____	
DATE OF EXECUTIVE BOARD APPROVAL (WHEN REQUIRED IN ACCORDANCE WITH SECTION 709(H), ADMINISTRATIVE CODE)		NOT REQUIRED					
		APPROVAL DATED ON FILE; THIS AGENCY _____					

JUSTIFICATION OF REQUEST (USE REVERSE IF NECESSARY)

COORDINATION: PLEASE CALL → NAME: _____ TEL. # _____

RENTAL				ANNUAL	MONTHLY	ANNUAL	MONTHLY
SAP FUND	CC	GL	IO	WBS ELEMENT	I CERTIFY THAT FUNDS FOR CURRENT YEARS COSTS ARE AVAILABLE FROM CITED APPROPRIATION AND BUDGET ALLOCATION		
					_____	_____	_____
					COMPTROLLER	_____	DATE

ATTACHMENTS: _____

I certify that the information contained on this form and the attachment thereto to be true and correct to the best of my knowledge

PLANS AND SPECIFICATIONS MANDATORY FOR ALL REQUESTS FOR NEW, INCREASED, DECREASED OR RENOVATED LEASE SPACE

_____ DEPARTMENT, BOARD, COMMISSION, INSTITUTION _____ DATE _____

LESSOR IDENTITY DISCLOSURE

DEPARTMENT OF GENERAL SERVICES _____ DATE _____

OTHER AS IDENTIFIED

I certify that the Governor approves this request.

_____ SECRETARY, OFFICE OF THE BUDGET _____ DATE _____