

Space Requirement Questionnaire

Building	Class A B C (Please Circle)	Desired Floor	
Name of Your Company		Length of Lease Desired	
Contact	/Title	Phone	
Present	Address		
Reason	for Move	Desired Location	
	/Future Employees:/ with Office rell us about the build-out needs you have. Enter as r	/ with Cubicle much relevant information as poss	
GENERAL	1. Mail Room Traffic:	oortant?	Estimated Square Feet
	2. Copy Centers □ Room or □ Alcove No. of Machines Location	Size	
	3. Open work-space / bull-pen ☐ Yes ☐ No Size		
	4. Computer/Server Room ☐ Yes ☐ No Size		
	5. Lunchroom/Lounge		
	6. Library		
	7. Conference Room		
	8. Central Files		
	9. Vault		
	10. Closets How Many Size		
	11. Additional Storage ☐ Yes ☐ No Size In Basement? ☐ Yes ☐ No Comments		
	12. Reception Area Size No. of Visitors per Day Furniture	e	
	13. Parking How many spaces do you need? How	w many spaces do you want?	N/A
Е	14. No. of Machines: Copiers Per	rsonal Computers Other	er
Q	15. Communications Telephones No. of Tru	ink Lines Intercom? □	∕es □ No
P M E N T	16. Any Equipment Using: Water Special	Soundproofing?	
	17. Equip. Requiring Special Ventilation		
Subtota	l of Estimated Square Feet		

Subtotal of Estimated Square Feet (from previous page)			
Number of Offices:			
Private Semi-private General	+ 15% Traffic Flow		
	Total Square Feet		

Email: norrisrealtyllc@gmail.com

Fax: 866.432.0670

^{*} Completed Questionnaires can be returned confidentially via email or fax:

^{*} If you have any questions, don't hesitate to give us a call at 240.232.3114 ext. 305