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REAL ESTATE & UNIVERSITY SPACE REQUEST FORM

In order to ensure the overall accuracy and performance of the University's space and real estate holdings. Following process must be utilized. For any related actions having cause or effect on the University's real estate holdings, this form must be utilized. Related actions shall include the following events;

a) Space or real estate results in a change to the financial liability of the University
b) Shift and or reallocation of space or real estate related expenses between Colleges and or Departments
c) Renovations of present leased premises.

INFORMATION:

Requestor (Primary Client): _____ Phone: _____
Dept. / College: _____ Fax: _____
E-mail: _____ Date: _____

REQUEST IS FOR:

☐ New University space ☐ Vacating University space ☐ Transfer of existing space with another school or department
☐

Lease Transactions

☐ Renewals ☐ Modification of lease terms or conditions ☐ Fair market analysis
☐ Exercising of lease options ☐ Consideration of 1st right of refusal ☐ New Lease ☐ Termination of Lease

OVERVIEW / SUMMARY OF REQUESTED ACTION(S):

Include approximate assignable square footage per space, occupants titles and indicate if this is a new hire, if existing employee please provide name:	
Suggested Building and Location	

WILL THE IDENTIFIED AREA REQUIRE RENOVATIONS?

☐ No ☐ Yes, please explain:

SPACE NEEDS ASSESSMENT:

If space is to be used for a grant or award-funded program and/or paid by the grant/award, please specify	Grant / Award Agency: Type of Grant: Amount of Grant: Duration: Status:
How long is the space intended to be used for the requested purpose?	
What is the anticipated time-line for moving into to the requested space?	
How does the request align with the role and mission of the unit, school, college, and university strengths?	

Office of Real Estate & Space Management
3141 Chestnut Street, Main 012
Phone: 215.895.2800 | Fax: 215.895.2229

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What are the associated benefits (financial, programmatic, etc.) resulting from this request?	
Have temporary arrangements been made to use any of your existing space for the requested purpose? If so, please explain:	
Capital Asset Allocation Committee CAAC	

How will moving, and/ or renovation costs of the requested be accounted for? (If using grant/award money, please confirm that this is an approved use of the money and the maximum amount available.)

Authorized Rent Payments	Fund:	Org Number
Any other Incidentals	Fund:	Org Number

Priority Rating: ☐ High ☐ Medium ☐ Low

APPROVAL PROCESS:

Requestor: _____ Date

This request has been reviewed by the Dean / Executive Management Team member of the College and she/he agreed that the expansion can not be accommodated within their existing space: _____ Date

Capital Asset Allocation Committee (CAAC) _____ Date

This request has been reviewed and approved for submission by the Operations & Space Management Office: _____ Date

This request has been reviewed and approved for submission by the Dean/Senior Vice President/Provost/CFO/President. Please attach further justification as to why this expansion can not be accommodated within the school or unit: _____ Date

Completed form should be sent to the Office of Real Estate & Space Management:
3141 Chestnut Street
Main Building, Room: 012
*E-Mail: **space@drexel.edu***

Submit by Email

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