CONTRACT COVERSHEET / BUSINESS TERM SHEET

FOR LEASES

Office of Real Estate Services 5000 Gulf Freeway, Building 1, Room 110, Houston, TX 77204-5025
Phone: 713-743-1694

Note: Submissions can take 45-60 busin (*) indicates required information	ness days for processing. Incor	mplete submission forms may	result in additional delays.		
*Name:		*Title:			
					*Date:
*Campus:			sion / Dept. Name:		
*Cost Center: Fund	Dept. ID	Prog	Proj	Acct	Amount \$
Have you already located space? [Section 1.1: Please provide detailed				ete section 1.1 and 1.5.	
Area interested in:					
Square Footage:		Type of spac	e (please check all that apply)		ce Conference Room Lab Space
Occupancy Deadline:					clude renovations to space if needed? Yes No
Desired Length of Lease Term:			Maximum	Monthly Rent Rate: <u>\$</u>	
Notes / Comments:					
Has there been, or is there current			ase provide copies of all ex	isting or prior agreeme	nts to our office.
Section 1.2: Please provide detailed	d information on space locat	ted.			
Building Name / Location Address:					
Contracting Entity Name:				Contact Person:	
Phone:			Email:		
Address: Have you already been provided with	a lease agreement? Yes	No	City:	Stat	e: Zip Code:
If yes, please include document in Word		packet along with all exhibits i			
Square Footage:		Type of spac	e (please check all that apply)): Classroom Offici	ce Conference Room Lab Space
Lease Term:				Mont	hly Rental Rate: \$
Build Out Required: Yes No If	fives please complete the folio	owing information.			unt of Build Out: \$
	.andlord [] University *If	[•] amount is more than \$300,00			approval by Facilities, Planning & Construction.
Occupancy Deadline: Notes / Comments:			Does this deadin	ie include renovations to	space if needed? Yes No
Notes / comments.					
Section 1.3: Please provide detailed	d information on space locat	ted.			
Will students be visiting leased space?	? 🗌 Yes 🗌 No	If yes, ho	ow frequently?		
Intended Use:					
Will there be any UH owned property in leased space (i.e. furniture, specialized equipment, computer equipment, etc.) Yes No					
Parking Requirements:				<u> </u>	
Building Access Requirements (i.e. afte	er hours, weekends, etc.):				
Required submission packet forms mu					
Recommendation for Award (mu Contract Coversheet/Business Te		prior to OCA submission)			
Justification of Proprietary (Sole)	Source) Acquisition (if applical	ble, this form is required by U	JH Purchasing Dept.)		
Please submit entire packet to ores					
Please submit entire packet to orea	s@un.eau.				
Certification of University Employee(s) By submission of this contract covershe				this contract in its usual a	nd customary manner for the lease of the
above-described property. I have provi	vided ORES all information I hav	ve obtained with regard to this	s transaction thus far and will	immediately contact ORES	S should any of the information I provided change. I derstand that should the amount for the entire term of
this contract exceed one million dollars			ION TOTTIS may result in addit	onal delays. Further, Furth	derstand that should the amount for the entire term of
Name/Title:			Signature:		Date:
(Originator of contract who certifies the	at the information listed above	e is correct)			
Name/Title:			Signature:		Date: