



Real Estate Project Request Form (Preliminary)

This form is to be used when a new lease or property purchase is desired and final terms of the contract are unknown. Approval is preliminary and authorizes UMRE to work with department to locate a suitable space based on the criteria included on this form. Final approval is required upon selection of suitable space.

Date:	Campus:	Type: <input type="checkbox"/> Lease <input type="checkbox"/> Property Purchase
Requesting Department:		
Business Use (REQUIRED):		
Justification (REQUIRED):		
Department Contact (Enter department contact who should receive email notifications for upcoming expiration dates, renewal options, etc.)		
First Name		Last Name
Email		Phone
Complete either Section 1 or 2 Below		
Section 1: Desired Lease Terms		
Type of Space: <input type="checkbox"/> Office/Academic <input type="checkbox"/> Residential <input type="checkbox"/> Clinical/lab <input type="checkbox"/> Storage <input type="checkbox"/> Land <input type="checkbox"/> Other: _____		
Maximum Annual Rent: \$ _____		
Square Footage: Minimum _____ Maximum _____ (If unknown, dept should work with Space Planning to determine needs)		
Date Needed: _____ Desired Term Length: _____		
Comments (describe other important details such as desired layout, location, parking needs, etc.):		
Section 2: Desired Property Details		
Type of Space: <input type="checkbox"/> Office/Academic <input type="checkbox"/> Residential <input type="checkbox"/> Clinical/lab <input type="checkbox"/> Storage <input type="checkbox"/> Land <input type="checkbox"/> Other: _____		
Maximum Purchase Price: \$ _____		
Square Footage: Minimum _____ Maximum _____ (If unknown, dept should work with Space Planning to determine needs)		
Date Needed: _____		
Comments (describe other important details such as desired layout, location, parking needs, etc.):		
Accounting: Grant Funded?		
Proposed MoCode to be billed:		

Approved By:

Business & Finance Officer

College/School Dean or Non-Acad Division Leader

Printed Name: _____

Printed Name: _____

Chancellor/Vice Chancellor Finance

Printed Name: _____

Completed form to be returned to Campus Real Estate Coordinator