

REQUEST FOR SPACE (See instructions on reverse)		1. DATE	2. AGENCY REQUEST NUMBER	3. LOCAL AGENCY CONTACT (Name)	PHONE NO.	4. AGENCY MA REPRESENT
5. TO: GENERAL SERVICES ADMINISTRATION PUBLIC BUILDINGS SERVICE			6. FROM: AGENCY ▶ NO., STREET ▶ CITY & STATE ▶ ZIP CODE ▶		7. FOR: AGENCY ADDRESS ZIP CODE BUREAU C	
8. TYPE OF REQUEST <input type="checkbox"/> INITIAL <input type="checkbox"/> CONTINUING REQUIREMENTS <input type="checkbox"/> EXPANSION <input type="checkbox"/> REDUCTION			9a. GEOGRAPHIC SERVICE AREA		9b. DELINEATED AREA	
10. TERM OF OCCUPANCY FROM (mo. & yr.) TO (mo. & yr.)			NO. OF YEARS FIRM TERM		11. TOTAL NO. OF PERSONNEL TO BE I	
12. SPACE REQUIREMENTS					13. SPECIAL REQUIREMENTS AND SERVICES (see attached) <input type="checkbox"/> ATTACHMENT(S) _____	
O F F I C E	TYPE OF SPACE		NO. OF PERSONNEL	SQ. FT. PER PERSON	SQ. FT.	TOTALS
	a.	PRIMARY OFFICE AREA				
		OFFICE SUPPORT AREA		▶		
		OFFICE SPACE SUBTOTAL			▶	
S T O R A G E	b.	ST 1 GENERAL STORAGE				
	c.	ST 3 WAREHOUSE STORAGE				
	d.	STORAGE SUBTOTAL (Lines b, c)			▶	
S P E C I A L	e.	SP 1 LABORATORY & CLINIC				
	f.	SP 2 FOOD SERVICE AREA				
	g.	SP 3 STRUCTURALLY CHANGED				
	h.	SP 4 AUTOMATED DATA PROCESSING				
	i.	SP 5 CONFERENCE & TRAINING				
	j.	SP 6 LIGHT INDUSTRIAL				
	k.	SP 7 QUARTERS/RESIDENTIAL HOUSING				
l.	SPECIAL SUBTOTAL (Lines e-k)				▶	
m.	TOTAL SPACE REQUIRED (Lines a, d, & l)				▶	
n.	OPEN LAND (Total acres)				▶	
o.	ST 2	INSIDE PARKING (No. of spaces)				
p.	OUTSIDE PARKING (No. of spaces)					
q.	TOTAL PARKING SPACES (Lines o, p)				▶	