

A. ANALYSIS OF REQUIREMENT

1. Line Office/Bureau: _____
2. Type of Requirement: () New () Expansion () Succeeding () Superseding
3. Location Required (City/State) _____
4. Authority () 40 U.S.C.585 () Other _____
5. Property Type Required: () Land () Bldg () Tower Space () Other _____
6. Area: Land _____ Acres/Square Feet Building _____ RSF
7. Term: _____ ~~////~~ Cancellation right after ____ days.
8. Fund Source & Accounting Code: _____
- Estimated Annual Rent:** _____
9. Expiration Date of Current Lease (if Applicable): _____
10. Delegation Type: _____ General _____ Special Purpose _____ Categorical

B. TYPE OF PROPOSED AGREEMENT: () Lease () License () Permit () MOU/IA () Other

C. PRELIMINARY ACQUISITION APPROACH:

- () Competitive () Non Competitive (CICA - 41 U.S.C. 253(c))

CICA Exemptions:

- _____ (1) Only one responsible source
- _____ (2) Unusual and compelling urgency
- _____ (3) National emergency
- _____ (4) International agreement or treaty
- _____ (5) Statute expressly authorizes
- _____ (6) National security issue
- _____ (7) In the public interest

D. MILESTONE EVENTS

	FORECAST DATE	REVISED DATE	ACTUAL DATE
Questionnaire Received	_____	_____	_____
Delegation from GSA (if Required)	_____	_____	_____
Market Survey	_____	_____	_____
SFO Issued	_____	_____	_____
EDD	_____	_____	_____
Receipt of Offers	_____	_____	_____
Appraisal Ordered	_____	_____	_____
Appraisal Received	_____	_____	_____
Preliminary OMB A-11 Evaluation	_____	_____	_____
Negotiations	_____	_____	_____
NEPA Documentation	_____	_____	_____
Revised Final Submittal Due	_____	_____	_____
OMB A-11 & FASAB Analysis	_____	_____	_____
Agreement Preparation	_____	_____	_____
Real Property Lease Review Board	_____	_____	_____
Final Document-Vendor Signature	_____	_____	_____
Lease Award/RPMD Signature	_____	_____	_____

Note: The foregoing plan may require adjustment should DOC Office of General Counsel review be required

	<u>Name</u>	<u>Date</u>
Line Office/Bureau	_____	_____ (indicates agreement with Plan only)
Realty Specialist	_____	_____
RPMD Branch Chief	_____	_____
RPMD HQ	_____	_____

Comments & Additional Information: