

- Building Asset #: _____
- Structure Name: _____
- Address: _____
- Town: _____
- Facility Telephone # _____
- Condition: Excellent Good Fair
 Poor Deteriorated
- Gross Square Feet: _____
- Net Useable Square Feet: _____
- Square Feet Currently Utilized: _____
- Nearest Crossroads: _____
- Occupancy Status:
 Currently Being Utilized
 Vacant-Surplus to Agency Needs
 Vacant-Not Surplus to Agency Needs
- Structure Classification:
 Maintenance/Repair Garage
 Office
 Salt /Sand Storage
 Storage/Warehouse
 Visitors Center
 Residence
 Airplane Hanger
 Other: _____
- Construction Type:
 Type 1: Wood Frame w/ Wood Exterior Finish
 Type 2: Wood Frame w/ Non-Combustible Finish Such as Masonry
 Type 3: Masonry Structure w/ Masonry Exterior Finish
 Type 4: Steel Structure w/ Non-Combustible (metal skin, glass wall, masonry, etc.)
 Type 5: Concrete Structure w/ Non-Combustible Exterior Finish (metal skin, glass wall, masonry, etc.)
 Other: _____
- Year of Construction: _____
- Last Major Renovation: _____
- Number of Floors: _____
- Used to House Clients: Yes No
- Number Currently Housed: _____
- Preventive Maintenance Plan Available:
 Yes No
- On/Eligible for Historic Register:
 Yes No
- Owned Parking Spaces for This Structure: _____
- Leased Parking Spaces for This Structure: _____

- Date Acquired: _____
- Initial Acquisition Cost: _____
- Building Value: _____
- Acquisition Method:
 Purchased
 Constructed
 Gift
 Other
- Deed Restrictions:
 Yes No Unknown
- Deed Restriction Description:

- Facility Name: _____
- Part of Which Facility:
 Not Part of a Facility
 Facility Not Listed
 Facility Owned by Another Agency
 State Pier-New London
- Cooling Fuel:
 #2 Oil
 #4 Oil
 #6 Oil
 Natural Gas/Propane
 Electric
 Multiple Fuels Used
 Other
 Not Cooled
- Heating Fuel:
 #2 Oil
 #4 Oil
 #6 Oil
 Natural Gas/Propane
 Electric
 Multiple Fuels Used
 Other
 Not Heated
- Hot Water Fuel:
 #2 Oil
 #4 Oil
 #6 Oil
 Natural Gas/Propane
 Electric
 Multiple Fuels Used
 Other
 No Hot Water
- Total Acres: _____
- Undeveloped Acres: _____
- 2-Year Use Recommendations: _____
- 5-Year Use Recommendations: _____
- General Memo: _____

- Tenant Name: _____
- Is This Tenant a State Agency:
 Yes No
- Lease Start Date: _____
- Renewal Date: _____
- Renewal Option (Years): _____
- End Date: _____
- Cost Per Square Foot: _____
- Annual Lease Cost: _____
- Number of Tenant Employees on Site: _____
- How Does The Tenant Use This Structure?
Provide Square Footage For Each Use:
- Used for Office Yes No
Square Footage Used for Office: _____
- Used for Transportation Yes No
Square Footage Used for Transportation: _____
- Used for Service Delivery Yes No
Square Footage Used for Delivery: _____
- Used for Judicial/Court Yes No
Square Footage Used for Judicial/Court: _____
- Used for Hospital Yes No
Square Footage Used for Hospital: _____
- Used for Corrections Yes No
Square Footage Used for Corrections: _____
- Used for Laboratory Yes No
Square Footage Used for Laboratory: _____
- Used for Dormitory Yes No
Square Footage Used for Dormitory: _____
- Used for Residence Yes No
Square Footage Used for Residence: _____
- Used for Education Yes No
Square Footage Used for Education: _____
- Used for Storage Yes No
Square Footage Used for Storage: _____
- Used for Other Yes No
Square Footage Used for Other: _____
- Prepared by: _____
Print Name
- Signature: _____
- Date: _____