|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | **Lessor’s Annual Cost Statement** | | | | **In response to Announcement/**  **Lease Contract #: XXXXX-XX-X-XXXXX**  **CITY/STATE**  **Date: MM/DD/YYYY** | | | |
| ***Paperwork Reduction Act Burden Statement***  *A federal agency may not conduct or sponsor, and a person is not required to respond to, nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a currently valid OMB Control Number. The OMB Control Number for this information collection is 2120-0595. Public reporting for this collection of information is estimated to be approximately 120 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information.*  *Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Aviation Administration, 10101 Hillwood Parkway, Fort Worth, TX 76177-1524* | | | | | | | | | |
| **INSTRUCTIONS:**  Offeror must read the detailed instructions found at the end of the document, fill in all applicable boxes, and provide the Solicitation submittal to the Real Estate Contracting Officer. Any attachments should be clearly listed in the appropriate section at the bottom. | | | | | | | | | |
| **It is the established policy of FAA to enter into leases only at rental charges that are consistent with prevailing ranges in the community for comparable facilities.** | | | | | | | | | |
| **1. Solicitation No.**  Click or tap here to enter text. | **2. Statement Date**  Click or tap to enter a date. | | | **3. Rentable Square Footage** | | | | | |
| **3A. Entire Building**  Click or tap here to enter text. | | | | **3B. Leased by FAA**  Click or tap here to enter text. | |
| 1. **Building Name and Address**   **Building Name:**Click or tap here to enter text.  **Street:**Click or tap here to enter text.  **City:**Click or tap here to enter text.  **State:**Click or tap here to enter text.  **Zip Code:**Click or tap here to enter text. | | | | | | | | | |
| **SECTION I – Estimated Annual Cost of Services and Utilities Furnished by Lessor as Part of Rental Consideration** | | | | | | | | | |
| **Services and Utilities** | | | **Lessor’s Annual Cost For** | | | | | | ***(c) For Government Use Only*** |
| **(a) Entire Building** | | **(b) FAA Leased Area** | | | |
| **A. Cleaning, Janitor, and/or Char Service**  **5. Labor Cost** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **6. Supplies *(Wax, cleansers, cloths, etc.)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **7. Contract Services *(Window washing, waste, and snow removal)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **Services and Utilities (cont.)** | | | **Lessor’s Annual Cost For** | | | | | | ***(c) For Government Use Only*** |
| **(a) Entire Building** | | **(b) FAA Leased Area** | | | |
| **B. Heating**  **8. Labor Cost** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **9. Fuel (check one)**  **Oil Gas**  **Coal Electric** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **10.System Maintenance and Repair Costs** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **C. Electrical**  **11. Current for Light and Power (*Including elevators)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **12. Replacement of bulbs, tubes, starters** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **13. Power for special equipment** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **14. System Maintenance and Repair *(Ballasts, fixtures, etc.)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **D. Plumbing**  **15. Water *(For all purposes) (Include sewage charges)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **16. Supplies *(Soap, towels, tissues not in 6 above)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **17. System Maintenance and Repair** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **E. Air Conditioning**  **18. Utilities *(Include electricity, if not in C11)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **19. System Maintenance and Repair** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **Services and Utilities (cont.)** | | | **Lessor’s Annual Cost For** | | | | | | ***(c)For Government Use Only*** |
| **(a) Entire Building** | | **(b) FAA Leased Area** | | | |
| **F. Elevators**  **20. Labor Costs *(Operators, starters, etc.)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **21. System Maintenance and Repair** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **G. Miscellaneous *(To the extent not included above)***  **22. Building Engineer and/or Manager** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **23. Security *(Watchmen, guards, not janitors)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **24. Social Security Tax and Workmen’s Compensation Insurance** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **25. Lawn and Landscaping Maintenance** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **26. Other *(Explain on separate sheet)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **27. SECTION I TOTAL** | | | **$**Click or tap here to enter text. | | **$**Click or tap here to enter text. | | | | **$** |
| **SECTION II – Estimated Annual Cost of Ownership Exclusive of Capital Charges** | | | | | | | | | |
| **Services and Utilities (cont.)** | | | **Lessor’s Annual Cost For** | | | | | | ***(c)For Government Use Only*** |
| **(a) Entire Building** | | **(b) FAA Leased Area** | | | |
| **28. Real Estate Taxes** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **29. Insurance *(Hazard, liability, etc.)*** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **30. Building Maintenance and Reserves for Replacement** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **31. Lease Commission** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **Services and Utilities (cont.)** | | | **Lessor’s Annual Cost For** | | | | | | ***(c)For Government Use Only*** |
| **(a) Entire Building** | | **(b) FAA Leased Area** | | | |
| **32. Management** | | | Click or tap here to enter text. | | Click or tap here to enter text. | | | |  |
| **33. SECTION II TOTAL** | | | **$**Click or tap here to enter text. | | **$**Click or tap here to enter text. | | | | **$** |
| **SECTION III- Lessor Certification and Signature(s)** | | | | | | | | | |
| **34/35. LESSOR CERTIFICATION- The amounts entered in Columns (a) and (b) represent my best estimate as to the annual costs of services, utilities and ownership for the offered space.** | | | | | | | | | |
| **TYPED NAME AND TITLE** | | | **SIGNATURE** | | | | **DATE** | | |
| **34A.**Click or tap here to enter text. | | | **34B.** | | | | **34C.**Click or tap to enter a date. | | |
| **35A.**Click or tap here to enter text. | | | **35B.** | | | | **35C.**Click or tap to enter a date. | | |

**LESSOR’S ANNUAL COST STATEMENT INSTRUCTIONS**

**INSTRUCTIONS FOR COMPLETING HEADER INFORMATION:**

1. **Enter the Government lease or Solicitation number, if available.**

**2. Enter the date that your statement was prepared and signed.**

**3A. Enter in this block a computation of the rentable area (multiple tenancy basis) for the entire building. The rentable area shall be computed by measurement to the inside finish of permanent outer building walls to the inside finish of corridor walls (actual or proposed) or to other permanent partitions, or both. Rentable space is the area for which a tenant is charged rent. It is determined by the building owner and may vary by city or by building within the same city. The rentable space may include a share of building support/common areas such as elevator lobbies, building corridors, and floor service areas. Floor service areas typically include restrooms, janitor rooms, telephone closets, electrical closets, and mechanical rooms. The rentable space generally does not include vertical building penetrations and their enclosing walls, such as stairs, elevator shafts, and vertical ducts.**

**3B. Enter in this block a computation of the rentable area to be rented to the Government. For this area, follow the procedure as outlined above, except that measurements are to be made only to the center of the partitions, which separate the area to be rented by the Government from adjoining rented or rentable areas.**

**4. Identify the property by name and address.**

**INSTRUCTIONS FOR COMPLETING SECTION I- ESTIMATED ANNUAL COST OF SERVICES AND UTILITIES**

**ITEMS 5. - 26. The services and utilities listed in this section are required in most of our rented space whether furnished by the Government or the Lessor unless otherwise stated in the solicitation. Carefully review the Solicitation and/or the proposed lease to identify those services and utilities to be furnished by you as part of the rental consideration. Then enter the actual cost from the previous year or for new construction, enter your best cost estimate, for each of these services and utilities in column (a) for the entire building and in column (b) for the area to be rented to the Government.**

**If any service or utility furnished for the space rented by the Government is not furnished throughout the building, or the cost of a service or utility furnished to the Government space exceeds the cost of the same service or utility furnished to other rented space, explain on a separate sheet.**

**For convenience, each major category has been divided into separate items such as labor costs and supplies so that they may be entered when applicable. However, in the event that your records are not maintained for each item contained in Section I, 5 through 26, the total for a major category (A through F) may be entered under the category heading in columns (a) and (b) in lieu of the specific items.**

**System maintenance and repairs includes the annual cost of such items as oiling, inspecting, cleaning, regulating, and routine replacement costs.**

**INSTRUCTIONS FOR COMPLETING SECTION II- ESTIMATED ANNUAL COST OF OWNERSHIP EXCLUSIVE OF CAPITAL CHARGES AND SECTION III- LESSOR CERTIFICATION AND SIGNATURE.**

**Items 28 through 32 will be useful in the Government’s determination of the fair market value of the space to be rented and shall be completed irrespective of whether Section I is applicable, as follows:**

**28. Include all applicable real estate taxes imposed upon the property.**

**29. Enter the annual cost of fire, liability, and other insurance carried on the real estate.**

**30. Enter the annual cost of wages, materials, and outside services used in repairs and maintenance of the building itself and all similar repairs and maintenance costs not included in Section I above (Heating, Electrical, Plumbing, Air Conditioning, and Elevators). This includes major repairs and changes in the nature of a permanent improvement such as annual cost to replace relatively short-lived items such as boilers, compressors, elevators, and roof coverings.**

**31. Enter any lease commission that you may be responsible for due to the Government leasing action.**

**32. Include administrative expenses such as agency fees, legal fees, auditing, and advertising. Do not include financial charges such as income or corporate taxes or organization expense.**

**33. Include the total of all the items above.**

**34 / 35. Complete Lessor Certification and Signature**