

**DANIEL MATTHEW ECCLESIASTICAL COLLEGE  
LEASE REQUEST FORM**

Any College office or School proposing to rent space from a private property owner must complete this form. The form must be completed whether a new lease or the renewal of an existing lease. The request should be forwarded, **ALONG WITH AN ORGANIZATIONAL CHART (including names, titles, position number and salary grade)**, directly to the College ARAP Office, P. O. Box 24742, Saint Louis, Missouri 63115. The requesting department should complete all numbered items on the form. Questions should be directed to the ARAP Office by email only. Use additional sheets if

1. School/ Department/Program:  
  
Present location(s) if presently occupying space:
2. Why is this space needed?
3. State preference for general location and give justification for preference. (All possible consideration will be given to preferred location; however, recommended location will be affected by such factors as rental rates, other lease terms and ADA compliance.)
4. Give proposed use of space (office, library, classroom, laboratory, storage, etc. - please indicate any unusual space needs):
5. Criteria and requirements for space (special air conditioning, special wiring, special telephone, computer and other related equipment, copy machines, etc.)
6. Justification for requirements:
7. Fund source for requirements if needed beyond the unfitting allowance by lessor: \_\_\_\_\_
8. Desired duration of lease: \_\_\_\_\_ Desired renewal options: \_\_\_\_\_
9. Desired commencement date of lease: \_\_\_\_\_
10. **Fund sources: (Please indicate account numbers & identify in Item No. 15)**
  - a. For rental (including utilities & janitorial services): \_\_\_\_\_
  - b. For maintenance or repairs not covered by Lessor \_\_\_\_\_
  - c. For restoring damaged areas upon vacating premises, if applicable: \_\_\_\_\_

\_\_\_\_\_ % Trust Funds    \_\_\_\_\_ % State Funds    \_\_\_\_\_ % Contract/Grants    \_\_\_\_\_ % Other

\_\_\_\_\_ % Departmental Overhead Funds    \_\_\_\_\_ % Central Overhead Funds  
(Must be approved by Budget Committee)

**If more than one account is being used to pay please indicated % to be paid from each account.**
11. Is this a New Lease Request or exercising a renewal option?
12. If new Lease, did your grant application state that additional space would be required? \_\_\_\_\_
13. Estimated gross square feet needed: \_\_\_\_\_ (Actual figure to be determined by conference between you and Property Office based on organizational chart provided and manner in which space is to be utilized.)

**(OVER)**

14. Describe any long range plans (5 years or more) for computer or similar equipment needs as they relate to this space.

15. Additional Information or comments: **(Include details of contract / grant projects which will utilize this space, if applicable: i.e., name, number, funding agency, effective dates).**

This form was completed by: \_\_\_\_\_

Tel # \_\_\_\_\_

**TO PREPARER: Please obtain signatures of Department Head and Dean's or Vice Chancellor's Office and forward to Property Office for further processing.**

Department Head: By: \_\_\_\_\_ Date: \_\_\_\_\_

Dean's or Vice Chancellor's Office: By: \_\_\_\_\_ Date: \_\_\_\_\_

Bishop Office: By: \_\_\_\_\_ Date: \_\_\_\_\_

Budget Approval:  
(Other than Central Overhead Funds) By: \_\_\_\_\_ Date: \_\_\_\_\_

Budget Committee Approval:  
(Central Overhead Funds Only) By: \_\_\_\_\_ Date: \_\_\_\_\_  
Associate Chief of Finance for  
Budget Committee

Property Office locates space and determines appropriate category of expense to complete leasing process

- If rent is \$5,000 annually and term is 3 years or less, the Property Office prepares the lease and obtains DMECS signature.
- If rent is greater than \$5,000 but less than \$25,000 annually and term is for 3 years or less, the DMECS, Chancellor, and the Director of the Department of Administration must approve Department of Administration forms. The legal Office review/prepares the lease.
- If rent exceeds \$25,000 annually, same procedures as above except that the Board of Trustees must approve prior to Council of Schools review and approval.
- If rent is greater than \$50,000 but less than \$150,000 annually, the Board of Governors must be given notification for purpose of information only.
- If rent exceeds \$150,000 annually, Board of Governors must approve prior to Council of School review and approval.

**LEASE REQUEST FORM****ATTACHMENT A**

This portion, if applicable, to be completed by the Leasing Manager, ARAP Office. The requesting department should complete the Lease Request Form. Questions should be directed to the ARAP Office by email only. Use additional sheets if necessary.

DEPARTMENT	CURRENT ANNUAL LEASE	REQUESTED ANNUAL LEASE	REQUESTED INCREASE (RECURRING)		POSSIBLE NON-RECURRING COST

NEW SPACE REQUEST: \_\_\_\_\_  
 OR  
 RENEWAL OPTION: \_\_\_\_\_

PRESENT LOCATION OF EXISTING LEASE: \_\_\_\_\_

PRESENT SQUARE FOOTAGE OCCUPIED: \_\_\_\_\_ -

PRESENT LEASE AGREEMENT EXPIRES: \_\_\_\_\_

PRESENTLY PAYING:

ANNUALLY: \_\_\_\_\_

MONTHLY: \_\_\_\_\_

COST PER SQUARE FOOT: \_\_\_\_\_

INCLUDES:

JANITORIAL COST: \_\_\_\_\_

UTILITY COST: \_\_\_\_\_

TELEPHONE COST: \_\_\_\_\_

PARKING: \_\_\_\_\_

ANTICIPATED SQUARE FOOTAGE BASED ON ORGANIZATIONAL CHART: \_\_\_\_\_ -

ANTICIPATED COST PER SQUARE FOOT: \_\_\_\_\_

ANTICIPATED ANNUAL COST: \_\_\_\_\_

ANTICIPATED MONTHLY COST: \_\_\_\_\_

ANTICIPATED TECHNOLOGY COST PER SQUARE FOOT: (\$4.00 as example) \_\_\_\_\_

TOTAL SQUARE FOOTAGE \_\_\_\_\_ x ANTICIPATED COST PER SQUARE FOOT FOR TECHNOLOGY = \_\_\_\_\_. (This is for internal wiring only and does not reflect cost for fiber optic connection)