# REPORT OF EXCESS REAL PROPERTY

| | |
|---|---|
| 1. HOLDING AGENCY NO. | DATE RECEIVED *(GSA use only)* |
| 2. DATE OF REPORT | GSA CONTROL NO. *(GSA use only)* |

| | |
|---|---|
| 3. TO *(Furnish address of GSA regional offices)*<br>General Services Administration | 4. FROM *(Name and address of holding agency)* |
| 5. NAME AND ADDRESS OF REPRESENTATIVE TO BE CONTACTED | 6. NAME AND ADDRESS OF CUSTODIAN |
| 7. PROPERTY IDENTIFICATION | 8. PROPERTY ADDRESS *(Give full location)* |

## 9. SPACE DATA

| USE | NUMBER OF BUILDINGS (1) | FLOOR AREA *(Sq. ft./M²)* (2) | NUMBER OF FLOORS (3) | FLOOR LOAD CAPACITY (4) | CLEAR HEADROOM (5) |
|---|---|---|---|---|---|
| A. OFFICE | | | | | |
| B. STORAGE | | | | | |
| C. OTHER *(See 9F)* | | | | | |
| D. TOTAL *(From SF 118A)* | | | | | |
| E. GOV'T INTEREST: | | | F. SPECIFY "OTHER" USE ENTERED IN C ABOVE | | |
| (1) OWNER | | | | | |
| (2) TENANT | | | | | |

## 10. LAND

| *(From SF 118B)* | ACRE/HECTARE OR SQ. FT./M² |
|---|---|
| A. FEE | |
| B. LEASED | |
| C. OTHER | |
| D. TOTAL | |

## 11. COST TO GOVERNMENT

| ITEM | SCHEDULE | COST |
|---|---|---|
| A. BUILDINGS, STRUCTURES, UTILITIES, AND MISCELLANEOUS FACILITIES | A *(Col. d)* | $ |
| B. LAND | B *(Col. f)* | |
| C. RELATED PERSONAL PROPERTY | C *(Col. h)* | |
| D. TOTAL *(Sum of 11A, 11B, and 11C)* | | $ |
| E. ANNUAL PROTECTION AND MAINTENANCE COST *(Government-owned or leased)* | | |

## 12. LEASEHOLD(S) DATA *(Use separate sheet if necessary)*

| | |
|---|---|
| A. TOTAL ANNUAL RENTAL | $ |
| B. ANNUAL RENT PER SQ. FT./M² OR ACRE/HECTARE | $ |
| C. DATE LEASE EXPIRES | |
| D. NOTICE REQUIRED FOR RENEWAL | |
| E. TERMINAL DATE OF RENEWAL RIGHTS | |
| F. ANNUAL RENEWAL RENT PER SQ. FT./M² OR ACRE/HA. | $ |
| G. TERMINATION RIGHTS *(in days)*<br>LESSOR GOVERNMENT | |

| | |
|---|---|
| 13. DISPOSITION OF PROCEEDS | 14. TYPE OF CONSTRUCTION |
| 15. HOLDING AGENCY USE | 16. RANGE OF POSSIBLE USES |

17. NAMES AND ADDRESSES OF INTERESTED FEDERAL AGENCIES AND OTHER INTERESTED PARTIES

18. REMARKS

| | | |
|---|---|---|
| 19. REPORT AUTHORIZED BY | NAME | SIGNATURE |
| | TITLE | |

AUTHORIZED FOR LOCAL REPRODUCTION
Previous edition is not usable

**STANDARD FORM 118** (REV.5-96)
Prescribed by GSA-FPMR (41 CFR) 101-47.202