Instructions for the Agency Recommendation Form 2

After the Form 2A Proposal Evaluations have been completed jointly by User Agency and DCAMM, complete and submit a Form 2 to DCAMM recommending 1) selection of a specific lease proposal, 2) selection of a proposal to lease public space without advertising, or 3) the rejection of all proposals received.

Fill in the requested information starting with “User Agency Name.”

User Agency Name: The User Agency submitting the recommendation.

Requested SF: The usable area identified in the RFP (or Form 1 if no RFP was issued).

Name of Office/Facility: Identify by name the activity to be housed at the premises.

Search Area: The Search Area identified in the RFP (or the location or Search Area identified in the Form 1 if no RFP was issued).

1. RECOMMENDATION

Check the appropriate box to indicate whether the agency is recommending the selection of a proposal, selection of public space, or rejection of all proposals received. Fill in the proposal number. If the recommendation is to reject all proposals received, attach a letter of explanation including the reasons for the recommendation and proposed next steps.

Check the box to confirm that evidence of statutorily required advertisement in local newspaper(s) was submitted to DCAMM. DCAMM cannot proceed with a selection decision without such evidence of compliance with this statutory requirement.

Address of Recommended Premises: Enter the street address and city or town of the recommended premises.

Name of Proposer: Enter the name of the proposer of the proposal recommended for selection.

Name of Landlord: Enter the name of the Landlord identified in the proposal recommended for selection.

Type of Agreement: Check "Lease" or check "Other" and identify the type of agreement.

Projected Occupancy Date: Enter the projected occupancy date.

Term of Agreement: Enter the Term of the proposed agreement in number of years and/or months.

Usable Area: Enter the confirmed usable area (USF) of the recommended premises from the DCAMM Proposal Cost Analysis.

2. COST

Refer to the DCAMM Proposal Cost Analysis to complete this section.

Annual Rent: Enter the proposed Annual Rent for each year of the lease term of the proposal recommended for selection. If you are completing this form on computer, the Rate/SF column and the Average Annual Rent will be calculated. If you are completing this form by hand, please calculate and enter this information.

Excluded Costs: Enter the estimated Year 1 dollar amount for all costs that are excluded from the proposed rent and that will be paid separately by the User Agency. If you are completing this form on computer, the Total will be calculated. If you are completing this form by hand, please calculate and enter this information.

Total Occupancy Cost: Enter the Annual Cost for each year of the agreement. This is the Annual Rent plus the total estimate of excluded costs. If there are costs excluded from the rent in Year 2 and beyond, use information obtained from the DCAMM Proposal Cost Analysis. If you are completing this form on computer, the Year 1 Annual Cost, the Cost/SF column, and the Average Annual Cost will be calculated. If you are completing this form by hand, please calculate and enter this information.

Project Manager Signatures: The project managers for the User Agency and DCAMM sign this form to confirm their agreement with the information contained in the Proposal Evaluations and this Agency Recommendation Form 2.

3. APPROVALS

The form should be signed and dated by an authorized User Agency signatory. Enter the signatory's title. Also include any relevant comments in the space identified.

An authorized signatory for DCAMM will sign the form to confirm agreement with the User Agency recommendation.
### 1. RECOMMENDATION

- Select Lease Proposal No.: ___
- Select Public Space for Lease
- Reject All Proposals

Evidence of advertisement in local newspaper(s), if applicable, has been provided.

- Address of Recommended Premises:
- Name of Proposer:
- Name of Landlord:

Type of Agreement: __________________________
Projected Occupancy Date: ________________

- Lease
- Other: __________________________

Usable Area: __________________________

Term of Lease: _______ years _______ months

### 2. COST

<table>
<thead>
<tr>
<th>Year</th>
<th>Annual Rent</th>
<th>Rate/SF</th>
<th>Year</th>
<th>Annual Cost</th>
<th>Cost/SF</th>
</tr>
</thead>
<tbody>
<tr>
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</tbody>
</table>

**ANNUAL RENT**

**ESTIMATE OF EXCLUDED COSTS**

<table>
<thead>
<tr>
<th>Item</th>
<th>Yr 1 Cost</th>
</tr>
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<tbody>
<tr>
<td>Janitorial Services</td>
<td></td>
</tr>
<tr>
<td>Lights &amp; Plugs</td>
<td></td>
</tr>
<tr>
<td>HVAC</td>
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<tr>
<td>Parking</td>
<td></td>
</tr>
<tr>
<td>Other:</td>
<td></td>
</tr>
</tbody>
</table>

**ESTIMATED TOTAL OCCUPANCY COST**

Average Annual Rent: __________________________

Average Annual Cost: __________________________

Agency Project Manager: __________________________
Date: __________________________
DCAMM Project Manager: __________________________
Date: __________________________

### 3. APPROVALS

**USER AGENCY**

**DCAMM**

Authorized Signature: __________________________
Date: __________________________

Authorized Signature: __________________________
Date: __________________________

Title: __________________________
Title: __________________________

**COMMENTS**