



SOUTH CAROLINA  
DEPARTMENT of ADMINISTRATION

Proposal to Lease Space

FMPS-202E  
(Rev. 01/2024)

STATE OF SOUTH CAROLINA  
DEPARTMENT OF ADMINISTRATION, REAL PROPERTY SERVICES  
1200 Senate St., Sixth Floor  
Columbia, SC 29201  
Email: [rps@admin.sc.gov](mailto:rps@admin.sc.gov)  
Fax: (803) 737-0051

Solicitation Closing Date: \_\_\_\_\_ Agency: \_\_\_\_\_

Property Offered (Street Address, Town)

Office: \_\_\_\_\_ Warehouse: \_\_\_\_\_ Other: \_\_\_\_\_

Is the property currently mortgaged? \_\_\_\_\_

Proposer Contact Information (Phone Number and Email Address)

Is Proposer the Property Owner? \_\_\_\_\_

If no, identify relationship to Property Owner (Ex: Broker, Agent, Option Holder): \_\_\_\_\_

Owner(s) of the Property as recorded in County Register of Deeds Office

Address of Owner(s)

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Describe Accessibility to Public Transportation

Is this a Lease or Sublease? \_\_\_\_\_

Type of Lease Being Proposed: Gross \_\_\_\_\_ Modified Gross \_\_\_\_\_ Net \_\_\_\_\_

*(If Modified Gross or Net is being offered, please complete the table below and offer further detail on additional sheets)*



Expense	Check Lessor or Lessee Responsibility		If Lessee's responsibility, estimate cost per square foot per year
	Lessor	Lessee	
HVAC Maintenance			
Water			
Sewer			
Electricity			
Janitorial-Lessee Area			
Janitorial-Common Area			
Building Maintenance-Lessee Area			
Building Maintenance-Common Area			
Dumpster/Trash Removal/Recycling			
Groundskeeping			
Security Service			
Pest Control			
Parking			
Fire Suppression			
Fire Extinguishers			
Taxes			
Insurance			
Plumbing Maintenance			
Electrical System Maintenance			
Other Operating expense:			

Space Offered: Rentable Square Feet \_\_\_\_\_ Usable Square Feet \_\_\_\_\_ Floor \_\_\_\_\_  
 Rentable Square Feet \_\_\_\_\_ Usable Square Feet \_\_\_\_\_ Floor \_\_\_\_\_

Complies with ADA? \_\_\_\_\_

Fire Suppression System: Wet \_\_\_\_\_ Dry \_\_\_\_\_ None \_\_\_\_\_

Security System (e.g., electronic, personnel): \_\_\_\_\_

Cubicles/Workstations Provided: Yes \_\_\_\_\_ No \_\_\_\_\_ # \_\_\_\_\_ Size \_\_\_\_\_



Building Amenities:

[Empty box for Building Amenities]

Warehouse space: RSF \_\_\_\_\_ Bays \_\_\_\_\_ Docks \_\_\_\_\_ Ceiling Height \_\_\_\_\_

Forklift Accessible? \_\_\_\_\_ Load Capacity of Floors \_\_\_\_\_ PPSF \_\_\_\_\_

Term and Rates offered:

_____ years at rate of _____ per RSF	Escalations: Yes _____ at _____ %	No _____
_____ years at rate of _____ per RSF	Escalations: Yes _____ at _____ %	No _____
_____ years at rate of _____ per RSF	Escalations: Yes _____ at _____ %	No _____
_____ years at rate of _____ per RSF	Escalations: Yes _____ at _____ %	No _____
_____ years at rate of _____ per RSF	Escalations: Yes _____ at _____ %	No _____

If Modified Gross, identify the amount of base rent allocated to operating expenses in the first year and any operating expense escalations:

Abated Rent Offered:

Tenant Improvement Allowance:

Other Conditions (such as date space will be available):

If other requirements were listed in the solicitation document but not previously addressed in this form, please address in the space provided below.

Parking Offered: Total Spaces Provided \_\_\_\_\_ Number of Reserved Spaces Provided \_\_\_\_\_

Handicapped Spaces \_\_\_\_\_

Owned \_\_\_\_\_ Not Owned \_\_\_\_\_ On-Site \_\_\_\_\_ Off-Site \_\_\_\_\_ Off-Site Location \_\_\_\_\_

Parking Garage \_\_\_\_\_ Surface Lot \_\_\_\_\_ Cost or No Cost \_\_\_\_\_



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Page 4 of 4

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Attach the following to this proposal, if available: Floor plan, Flyer or Brochure

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CERTIFICATE

I, the undersigned, hereby certify that I have the authority to submit this proposal and enter into negotiations and that the statements made by me on this proposal are complete and true to the best of my knowledge and are made in good faith. I understand that if I knowingly make any misstatement of fact, I am subject to disqualification and other penalty imposed by law. (Note: Read this proposal and your answers carefully before signing.) *Only signed proposals will be considered.*

SIGNED

DATE

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