DOA - State Property Office & DOI - Risk Management Property Reporting Form

(Dual Reporting for DOA and DOI)

| Department or | University | Division | | | | |
|--|--|------------------------------|---|---|------------------------|--|
| Department/Division # | | Complex # - | - Asset # | (if assigned) | | |
| Building Name | | Street Address | | | | |
| City County Zip Code - (Please provide zip code for the building location, not for the mailing address) | | | | | | |
| Latitude | atitude Longitude (Units: Decimal Degrees) | | | | | |
| Your Name | Phone # () - Ext Email | | | | | |
| New Building Acquisition Renovation Addition Demolished Check appropriate category. If more than one category is checked, please explain) | | | | | | |
| New Building: | Date Accepted by S | | Constructed | Construction Cost \$ | | |
| Acquisition: | Date of Acquisition Year Constructed Acquisition Cost \$ | | | | | |
| | Method of Acquisiti | (m/d/y) ON (check method) | Construction Condemnation | Construction Purchase Lease/Purchase Condemnation Donation Transfer Other | | |
| Renovation: | Date of Acceptance Renovation Type (c | | Renovation Cost Add space Reduce Space Expanded Rooms None | | | |
| | | | | Decreased Gross Sq. Ft. Decreased Net Sq. Ft. | | |
| Main Use(s) of Building (e.g., office, dormitory, automobile maintenance, furniture storage, produce sales, laboratory, etc.) Building Occupants | | | | | | |
| Gross Sq. Ft. Net Sq. Ft. National Register of Historic Places: Yes No | | | | | | |
| Total # of Floors Floors Above Ground Floors Below Ground | | | | | | |
| Fire Alarm: Yes No Fire Sprinkler System: Yes No Flood Zone (e.g., A, A1, B, C, V, X, etc.) Fire Department or Fire District (providing primary response) | | | | | | |
| Heat System Forced Air Steam Hot Water Resist None Space Heater A/C System Chiller Central Window None | | | | | | |
| Roof Construction Floor Construction Exterior Wall Construction | | | | | | |
| Insurance Coverage | | | | | | |
| Dept/Div # | Coverage For (Bldg or Conts) | Funding (Gen. or Spec.) | (Fire, EC, VMM, "A | of Coverage II Risk"(Special), "All Risk" ters/Misc), etc.) | Replacement Value (\$) | |
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