



Today's date: _____

Please do not leave any question blank. Answer N/A or none for answers that do not apply.

NAME of Property: _____

Address/LOCATION: _____

Abilene, Texas/ Zip: _____

Indicate the TYPE OF PROPERTY by checking the box next to the description that best fits :

- Commercial Office
- Commercial Retail
- Industrial/Manufacturing/Warehouse

Building Features:

Please list BUILDING INFORMATION for the property (i.e. Dock doors, roll-up doors, ceiling height, sprinkler system, etc.)

Please list all MAJOR TENANTS on the property:

Building/Space Size:

Please list the TOTAL SQUARE FOOTAGE:

Please list the square footage CURRENTLY AVAILABLE:

LARGEST possible square footage of AVAILABLE SPACE:

SMALLEST possible square footage of AVAILABLE SPACE:

Pricing:

ANNUAL RENT per square foot: _____

List any additional fees or costs concerning rent:

Usual LENGTH OF LEASE Agreement:

If available for purchase as well, please list the PURCHASE PRICE.

CONTACT INFORMATION:

Company Name: _____

Contact Name: _____

Full Address: _____

Phone No.: _____ Fax No.: _____

Contact Email Address:

Please fax completed form to **325-673-9193**, or mail to:

Abilene Industrial Foundation • P.O. Box 2281 • Abilene, Texas 79604