

Application for Space

Space Florida | 505 Odyssey Way | Exploration Park, FL 32953

Thank you for considering space at our facility. Before completing and submitting the application, please read the information below to help expedite the review and approval process.

- ⇒ Application for Space Package includes
 - Application form
 - New Tenant Evaluation form
 - Request for Modification form
 - Space Requirements form
 - Request for IT/Comm Worksheet
- ⇒ Submitting this document is a request for space only. It does not commit the applicant or Space Florida to any agreement, but it does place a 'temporary hold' on showing the property to other potential clients until a decision is made.
- ⇒ Complete the form in its entirety, questions may be directed to:
 - Carol Taylor | 321.261.3636 or;
 - Pete Eggert | 321.730.5301 x123
- ⇒ Submitting organization must be registered to perform business in the State of Florida <http://dos.myflorida.com/sunbiz/>
- ⇒ Leasing laboratory space requires the applicant to complete a New Tenant Evaluation form which will include research process(es), chemical, and waste details. Assistance with this form is provided.
- ⇒ Modifications to the premise, including power, plumbing, structural, etc. is captured on the Request for Modifications form
- ⇒ Specialized equipment for use on premise is captured on the Facility and Equipment Requirements form. Information should include special power, cooling, heating, plumbing, etc
- ⇒ Full communications services are available at a cost. The applicant must complete the Request for IT/Comm form, which identifies available services, description, and pricing, to elect services. If there is no need for IT/Comm services, please notate on form.
- ⇒ A Certificate of Insurance is required before a lease will be approved.
- ⇒ A copy of the Space Florida Sublease Template is included in your application package for review.

SPACE APPLICATION

APPLICANT INFORMATION

Date of Application

Applicant's Name

Phn

CPhn

Organization Name

Phn

Organization's Mailing Address - Street City, State, Zip

Organization's Signature Authority - Full Name

Phn

CPhn

Signature Authority's Email address

Leasing Point of Contact

Phn

CPhn

Leasing Point of Contact's Email address

State of Florida Sunbiz.org Document No.

LEASE INFORMATION

Intended Use of Premises

Describe work to be conducted in the space:

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Application Type:

New

Extension

Modification

Leasing Terms:

Length of Lease (Years)	Requested Start Date	Requested End Date

SPACE APPLICATION

PREMISE INFORMATION - NOTE: Prices may not reflect most recent annual rates

Office Space

Type	Description	Unit Price	Room No	Total SF	Total
Cubicle	Cubicle office - furnished	\$26 psft			
Private	Closed door office – furnished	\$31psf			
Suite	Group of cubicles or private offices with private entrance – furnished/unfurnished	\$45psf			

Lab Space

Type	Description	Unit Price	Room No	Total SF	Total
Dry	Laboratory space designed to support hardware research/testing	\$40psf			
Wet	Laboratory space designed to support biological or chemical research	\$50psf			
EGC	Environmental Growth Chamber	\$330psf			

Other Space

Type	Description	Unit Price	Room No	Total SF	Total
Storage	Storage Space	\$10psf			
Outside	Designated exterior footprint	Negotiable			

Common Area Maintenance:

- ✓ Standard - \$5.00 per total sqft – default charge for leased office and equipment space
- ✓ Premium - \$6.50 per total sqft – default charge for leased laboratory space
- ✓ Premium CAM includes use of central services laboratories, shared laboratory equipment, work shop, chemical pharmacy, hazardous waste management and other laboratory services

Authorized Signature*

Title

Date

*An authorized signature is defined as the person authorized by the organization to obligate the organization to a contract or an agreement.