



AVAILABLE BUILDING INFORMATION SHEET

Cabinet for Economic Development
 Site Evaluation Branch
 300 West Broadway
 Frankfort, KY 40601
 TELEPHONE: (502) 564-4886, ext. 3204
 FAX: (502) 564-0023

Building Name	Total Sq. Ft.	Primary Use (check only one)	
Street Address	City	Zip	Manufacturing <input type="checkbox"/> Distribution <input type="checkbox"/> Warehouse <input type="checkbox"/> Office <input type="checkbox"/>

County:	Within City Limits <input type="checkbox"/>	Zoning Description	Previous Use
School District:	Zoned <input type="checkbox"/>		
Enterprise Zone: <input type="checkbox"/>	Empowerment Zone: <input type="checkbox"/>	Spec Building <input type="checkbox"/>	Type Construction
Multi-story <input type="checkbox"/>	Vacant <input type="checkbox"/>	Year Built	
Multi-tenant <input type="checkbox"/>	If not vacant, when can the building be occupied		Year(s) of Additions/Renov.

Multi-tenant Notes	Acreeage	Additional Acreeage:	
	Additional acreeage description		
	Parking Lot		
Surface:		Rail Access	
Spaces:		Rail Served <input type="checkbox"/>	Rail Possible <input type="checkbox"/>
		Inside Bldg. <input type="checkbox"/> Rail Co. Location of spur _____	
		Interstate/Parkway Access Mileage to Highway _____	

PLANT SPECIFIC			
Floor Type:		Truck Docks/Doors	
Floor Reinforced: <input type="checkbox"/>		Inside Truck Docks: _____	
Floor Thickness		Outside Truck Docks: _____	
Ceiling Height (ft.)		Drive-In Doors: _____	
Minimum: _____	At Eaves: _____		
Maximum: _____	At Center: _____		
Ceiling Height Notes			

Number of Cranes:	Sprinklered: <input type="checkbox"/>	Commercial/Intl: _____	Distance (miles)
	Wet <input type="checkbox"/> Dry <input type="checkbox"/>	Local: _____	

Crane Type	Capacity (Tons)	Clearance (ft.)	
		Horizontal	Vertical

Bay Sizes						
Clear	Column 1	x	Column 2			
<input type="checkbox"/>		x				
<input type="checkbox"/>		x				

Section Type	Other, specify	Sq. Ft.	Floor Dimensions	Lighting	Heating	AC
Manufacturing						
Office						
Other	Other					
Whse/Distr						

ELECTRIC & NATURAL GAS INFORMATION													
Electric 3-phase available: <input type="checkbox"/> Dual service available: <input type="checkbox"/> Please enclose volt/amp information Not Available <input type="checkbox"/> Enclosed <input type="checkbox"/>	Natural Gas Gas Served <input type="checkbox"/> Gas Possible <input type="checkbox"/> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>Line Size</th> <th>At Street</th> <th>At Building</th> </tr> <tr> <td>0</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>0</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>0</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>	Line Size	At Street	At Building	0	<input type="checkbox"/>	<input type="checkbox"/>	0	<input type="checkbox"/>	<input type="checkbox"/>	0	<input type="checkbox"/>	<input type="checkbox"/>
Line Size	At Street	At Building											
0	<input type="checkbox"/>	<input type="checkbox"/>											
0	<input type="checkbox"/>	<input type="checkbox"/>											
0	<input type="checkbox"/>	<input type="checkbox"/>											
Alternative fuels: _____													

NOTES & COMMENTS

WATER & SEWER INFORMATION

Water				Sewer			
Water Served <input type="checkbox"/>	Water Possible <input type="checkbox"/>			Sewer Served <input type="checkbox"/>	Sewer Possible <input type="checkbox"/>		
Company: _____				Company: _____			
Line Size	At Street	At Building		Line Size	Check if force main	At Street	At Building
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

OWNERSHIP/CONTACT INFORMATION

Owner Publicly Owned:

Mr./Ms	First	Middle	Last	Suffix	Title
c/o					
Company					
Address					
City, St Zip					
Phone 1	Phone 2				

Additional Owners

Agent Exclusive listing:

Mr./Ms	First	Middle	Last	Suffix	Title
Company					
Address					
City, St Zip					
Phone 1	Phone 2				

Community Contact Has key to building?

Organizatio					
First	Middle	Last	Suffix	Title	
Phone					
Fax					
Email:					

Please provide your name, phone, fax & email.

PRICES

Sale As Is

Sale Price: _____

Terms/Notes _____

Lease As Is

Price per sq. ft. per year	Min	Max	<input type="checkbox"/>
Term (Years)	Min	Max	

Terms/Notes _____

Tenant Pays

Taxes Insurance Maintenance

REPORTS, FLIERS & PHOTOS

Please check whether the following are available. If so, please send to Tammy Bullock's attention.

Phase I Environmental	Building Floor Plan
Not available <input type="checkbox"/>	Not available <input type="checkbox"/>
Enclosed <input type="checkbox"/>	Enclosed <input type="checkbox"/>
Plot/Tract Plan	Brochure/Flier
Not available <input type="checkbox"/>	Not available <input type="checkbox"/>
Enclosed <input type="checkbox"/>	Enclosed <input type="checkbox"/>
Outside Photographs	Inside Photographs
Not available <input type="checkbox"/>	Not available <input type="checkbox"/>
Enclosed <input type="checkbox"/>	Enclosed <input type="checkbox"/>