

## Client Project Agreement (CPA) Strategic Requirements

Public Buildings Service, Office of Portfolio Management and Customer Engagement

Purpose: The Client Project Agreement (CPA) serves as the agreement from the customer to secure strategic requirements no later than 30 months prior to expiring occupancy (12 months prior to the OMB submission for prospectus projects), allowing our customers and the taxpayers the opportunity to reduce space and rent for the government's overall budget. Planning earlier will also help mitigate the risk of costly lease extensions and provides adequate time for the government to strategically negotiate and secure mission-driven space actions for the mutual benefit of the customer and the taxpayer. Note: There may be circumstances where the strategic requirements are needed outside of the usual cycle times.

provides adequate time for the g and the taxpayer. Note: There ma									
and the taxpayer. Note: There me	ay be circumstance	.5 WHERE THE	e strategie requir	ciricinto di	. necueu outside c	or the usual cycle	times.		
Part 2: Basic Project Infor	mation								
Project Name									
Project Description									
Existing OA Number(s)									
Agency/Bureau Names						Agency Bureau Code(s)			
Agency POC Name				GSA P	lanning Manager				
Agency POC Email		GSA Planning Manage			lanning Manager	Email			
Agency POC Phone				GSA P	lanning Manager	Phone			
Building Name (if known)				Projec	t Number(s)				
Proposed Address City, State					<b>Housing Solution</b>				
	State Name		If initial housing recommendation is Leased, what is the proposed lease						
Estimated Term (in months)		# Months F	irm		If the recommendation is				
OA Effective Date				anything other than full and open, the LCO must be consulted with a agreement of the strategy prior to finalizing the strategy.					
OA Expiration Date	12/29/3799								
Part 2a: Space and Project	t Strategy								
Explain the GSA proposed strate information on cost savings, sha change strategy best serves the requirements for this space.	red services, cons	olidations, e	etc. If no change	is being pr	oposed, then you	must document	why a stay in place/no		
Federal Vacant Space Invento	<u> </u>	atory for L	eased Projects	):					
Is vacant federally-controlled spa	ace available?			Please	select Yes or No,	if <b>Yes</b> , see below	l.		
If yes, but not backfilling, please	explain why vacan	t federally-c	ontrolled space i	is not suita	ble for the custom	ner.			
Part 2b: Space Type Inforr	mation								
Anticipated R/U Factor	1.150000000		All in UR	0	Total USF / Oc	ccupant Count = All in	UR		

Part 2b: Space Type Information							
Anticipated R/U Factor	1.150000000		All in UR	0	Total	otal USF / Occupant Count = All in UR	
Number of Occupants			Office UR	0	Offic	ice Space / Occupant Count = Office UR	
						USF*	RSF
Office Space						0.00	0.00
Office Support Space						0.00	0.00
Special Space Subtotal (You may enter in the Space Type Field customer specific space names, and then using the drop down box, select the space type based on GSA Space Standards - see the Space Details tab for descriptions)					0.00		
Space Type						0.00	0.00
Space Type						0.00	0.00
Space Type						0.00	0.00
Space Type						0.00	0.00
Space Type						0.00	0.00
Space Type						0.00	0.00
Space Type						0.00	0.00
Warehouse (WRH) (occupied or unoccupied)					0.00	0.00	
				Total Square Fe	eet	0.00	0.00
Other (Wareyard)					0.00		

Printed: 12/9/2021 1

Antenna (enter # of antennas)				0.00			
* The USF entered should represent the net	square feet and any circulation re	equired for that space.					
Should this Occupancy Agreement be	Non-Cancelable based on P	Be sure	and document reason for	N/C OA in narra	tive.		
Explain how this space support	ts the agency's mission	and operational nee	ed:				
Unique Requirements and Operati	onal Needs		Description of Require	nent or Operational	Need		
Does the customer have any adjacence	y requirements or restrictions	s?					
Does the customer have any floor level	l requirements or restrictions	5?					
Does the customer have set back or si	ite fencing requirements?						
Does the customer have unique or spe	ecific floor plate or column sp						
Does the customer have a public facing	ig/lobby/waiting area require	ment?					
Does the customer have a holding cell	/secure area requirement?						
Does the customer have a requiremen	t for a sallyport or carport?						
Are there requirements for wareyard o							
Any requirements for large vehicles? e parking lot, turning radius, height restrictions.		pull into/exit the					
Does the customer have a need for a loading	ng dock and/or access to a freigh	nt elevator?					
Is the Facility Security Level known or	· · · · · · · · · · · · · · · · · · ·	uirements?					
Does the customer have a high risk us (if yes, a GSA Form 12002 is required to be	e operation?	ackage)					
Does the customer have a requiremen							
Does the customer have requirement to							
Does the customer have a server room/oth	· -	/7 operation?					
Does the occupancy require 24/7 oper	rations in full or in part?		Hours of Operation	to			
Standard Operation is 5 days a week, 1	10 hours a day, or 50 hours pe	er week.	Days per Week		Total Hrs per		
					Week		
Part 2c: Parking Information			2 101				
Govt Vehicles/Official Parking	Number of Spaces	Secured/Unsecured	Reserved/Unreserved	Tuend .	. ( . 5)/		
Surface	0			Will there be a require Charging?	ement for EV		
Structured	0	2 101		If Van have many ats	ations?		
Visitor Parking	Number of Spaces	Secured/Unsecured	Reserved/Unreserved	If Yes, how many sta	IUOIIS?		
Surface	0			_			
Structured	0	0 101	5 1/11				
Employee Parking	Number of Spaces	Secured/Unsecured	Reserved/Unreserved				
Surface	0			Determination and Findings Waiver	16 1		
Structured Structured	0	Chuchama		T manigo vvalver	If yes, please a	attacn	
Part 2d: Utilization Rate and	<u>-</u>					and all a	
Use the space below to describe the approach. If the customer does not be approach.				oject and now this p	roject aligns	with that	
	1 3,						
Project Reduces Agency Footprint							
Confirm UR Methodology meets C	ustomer UR Standard						
Confirm Union Agreement to revise	ed workplace standard			Shoul	ld be provided b	by the agency	
Part 2e: Location and Deline	eated Area Confirmati	ion					
Map attached to this agreement							
Mission driven justification attached to this agreement							
Part 2f: Initial Project Risks and Opportunities (add attachments as applicable)							
Identify if there are any high-level risks to this project that would impact the project schedule. This may include funding issues, union review, workload							
complications, special requiremen	ts, market conditions and/	or prospectus level.					
Are there one high level and are	tion for this proise to Fr	nloo of consulting	movinoluda siaifi	aduation of sure	nd ocata !	round	
Are there any high-level opportunit utilization, proximity to other agen			nay include significant r	euuction of space al	iu costs, imp	loved	

Printed: 12/9/2021 2

Part 2g: Other Considerations

GSA Procured Furniture (if applicable)		GSA Disposal Services	Needed				
GSA Procured Move Support Needed		RWA (As-is, TI buy-dow					
Part 2h: Preliminary Budget (this section may	vary in completeness base	d on information available	or solution sought)				
Estimated Market Ren	t Rate per RSF	Annual Amt					
Shell Rate/Fully Serviced Rate	\$0.00	\$0.00	Base TI	\$49.13			
Operating Rate	\$0.00	\$0.00	LCI				
Real Estate Taxes (Leased	\$0.00	\$0.00	Tier				
Total Single Yea	\$0.00	\$0.00	Amortization Term		Months		
Estimated Rent Over Term of O	ccupancy (excluding TIs)	\$0.00	Amortization Rate	1.385	%		
Additional Occupancy Cost	s Amount	Funding Course	State Name				
Additional Occupancy Costs		Funding Source					
TI Genera TI Custon			If the costs are identified as F				
TI Allowance			provide funds prior to contrac RWA. Any other Funding Sour				
			of Rent. Cost estimates as part of Order of Magnitude and do not of				
Above Allowance (if known  Total Initial TI Estimate/Cost Over TI Tern		\$0	RWA funds. These estimates do not include f				
Functional Cost Estimate	*****	\$0	If a firmational anatomistation	and Allauranan	فريم مسم الأزر		
			If a functional cost estimate is us	sed, Allowance v	viii zero out.		
Building Specific Amortized Capital (BSAC			F	:61			
Non-Rent Related Funding			Enter Purpose of Funding	IT KNOWN			
Funding Source #							
Funding Source #2							
Funding Source #3							
Consolidation Funding (if applicable							
FIT Funding (if applicable  Total Estimated Initial Project Cos		Over Estimated Term					
Part 2i: CPA Checklist and Supporting Do			inable)				
7.2		verable documents as appl		lionoo Momo			
SF-81 or Agency Agency Design G			Signed RDA Comp				
			DA Mission Justification (if applicable)  Parking Justification (if applicable)				
Agency Unique R			High Risk Use (GSA Form 12002) Creat				
Agency Unique R Lease Cost Analy			Milestone Schedu		realeu		
Part 2j: Client Project Acknowledgement	, , , ,		Willestone Schedu	le			
Concurrence to this CPA acknowledges that the in		a accurate and represent	to the Strategie Deguiromen	to of this pro	icat and ic		
the agreed upon strategy for this project. As the p change, and additional acknowledgement of the p this CPA does not constitute any financial obligation As with other forms of project agreements, all GSA	roject progresses, based roject may be needed. W on to this project, but rath a Rent Space Pricing Polic	on further development hile there may be financi er is an initial estimate b cy rights and obligations	of requirements, strategy a ial information contained in pased on known project and	ind general sc n section 2h, s d market cons	ope may signature of		
By signing below, all parties state that, to the best	of their knowledge, this ir	formation is accurate.					
GSA Agreement							
			Date				
Signature							
	Pl	Planning Manager					
Printed Name (GSA Representative)	Titl	Title					
Tenant Agency Agreement							
Tenant Agency Agreement							
			Date				
Signature							
Printed Name (Agency Designated Representative)		Titl	e				
				Version 4.0	January 2022		

Printed: 12/9/2021 3