

## Site Selection Questionnaire (Buildings)

The completed questionnaire should be sent to Michael Malone, [mmalone@texarkana.org](mailto:mmalone@texarkana.org) for entry into the Site Selection database. All property will be reviewed before being published. It is essential that all fields are populated. A sales price is required if the building is for sale.

LOCATION	
Building Name	
Address	
City	
State	
Zip Code	
County	
Within City Limits	
Industrial Park	
Enterprise Zone	
Foreign Trade Zone	
Attainment Zone	

AVAILABILITY	
Available Square Feet	
Total Square Feet	
Sale Price	
Lease Price	
Sub dividable	

FEATURES	
Lot Size (acres)	
Additional Acreage	
Multi-Tenant Building	
Number of Buildings	
Property Type	
Previous Use	
Parking	
Number of Parking Spaces	

**CONSTRUCTION**

<b>Floor</b>	
Materials	
Materials	
Insulated	(Yes - No)
<b>Other Specs</b>	
Sprinklers	(Yes - No)
<b>Air Conditioning</b>	
Office Area	(Yes - No)
<b>Heating</b>	
Office Area	(Yes - No)
<b>Truck Facilities</b>	
Docks	<input type="text"/>
Floor Level Doors	<input type="text"/>
Wells	<input type="text"/>
<b>Construction Date(s)</b>	
Original	<input type="text"/>
Additions	<input type="text"/>

**UTILITIES**

Electricity Supplier	<input type="text"/>
Natural Gas Supplier	<input type="text"/>
Water Supplier	<input type="text"/>
Sewer Supplier	<input type="text"/>
Telecommunications Supplier	<input type="text"/>
Fiber Optic Network	<input type="text"/>

**COMMENTS**

Comments	<input type="text"/>
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**CONTACT**

The following is for local use only at this time; the community contacts responsible for updates should be entered into the database.

Owner		Real Estate Contact	
Name	<input type="text"/>	Name	<input type="text"/>
Phone No.	<input type="text"/>	Phone No.	<input type="text"/>
Title	<input type="text"/>	Title	<input type="text"/>
Organization	<input type="text"/>	Organization	<input type="text"/>
Address 1	<input type="text"/>	Address 1	<input type="text"/>
Address 2	<input type="text"/>	Address 2	<input type="text"/>
City	<input type="text"/>	City	<input type="text"/>
State	<input type="text"/>	State	<input type="text"/>
Zip	<input type="text"/>	Zip	<input type="text"/>
Mobile No.	<input type="text"/>	Mobile No.	<input type="text"/>
Fax No.	<input type="text"/>	Fax No.	<input type="text"/>
Email	<input type="text"/>	Email	<input type="text"/>