### Lease Space Questionnaire (Amendments)

**Address of Current Lease**: _________________  
**Date**: _________________

### Department Information

**Department Requesting Renewal of Space**: _________________

**Department contact**: _________________

**Contact phone number**: _________________  
**Contact email address**: _________________

**Authorized signer/ Facilities Director (print)**: _________________

**Facilities Director’s signature**: _________________

**Shortcode**: ___________________ (___%) ___________________ (___%) ___________________ (___%) ___________________ (___%)

### Lease Extension

- [ ] yes  
- [ ] no

**Length of renewal (yrs)**: _________________  
**Options**: _________________

### Tenant Improvements Only

- [ ] yes  
- [ ] no

**Explain Tenant Improvements Requested**: _________________

**Budget**: $ _________________

### Additional Square Footage Needed

- [ ] yes  
- [ ] no

**Amount of square footage needed**: _________________

**Use**:  
- [ ] offices  
- [ ] cubical  
- [ ] other (explain: _________________)

### Any additional comments/concerns:

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