

LESSEE INFORMATION

Agency/Lessee:		
Address		
City	St	Zip
Contact Name	Title	
City	St	Zip
Phone	Phone	
Email		
Federal Tax ID #:		
Contact for billing	Phone	
Email		

TERMS OF SALE

Requested term: 24 months 36 months 48 months 60 months
Payment Mode: Year: Annually Semi-Annually Quarterly Monthly
First Payment Due: In Advance In Arrears
Anticipated Delivery Date
Equipment Description
The appropriations for this project have been <input type="checkbox"/> Submitted <input type="checkbox"/> Approved for the current year

VENDOR INFORMATION

Contractor/Vendor		
Address		
City	St	Zip
Contact Name	Title	
Phone	Fax	
Email		
Website		

ESSENTIAL USE INFORMATION

What essential government use dose this department perform?
What essential function do the users of this product perform?
How dose this product help the users perform this function?
Do the user plan to use this equipment for the full term of the lease? Yes No
What is the cost impact on the user?
Dose this product generate cost savings for the user? Yes NO
Why is this product being acquired? Please be specific in the description of the project.
If this is a replacement product, how long has current product been is service?
Have funds been obligated for the leasing of his product? Yes No
Is multi-yea financing available? Yes No
What if any, are the performance responsibilities of the manufactuer/vendor after acceptance?

BACKGROUND INFORMATION OF THE USER AGENCY

Is there any threat of the Agency downsizing or cutting funding during the proposed lease term? Yes No
Is there any threat of the installation location downsizing or closing during the proposed leas term? Yes No
Is there any possibility of the Agency itself being eliminated? Yes No
Dose the Agency receive any non-appropriated funding? Yes No
Dose the Agency plan on moving this installation location? Yes No <i>If yes, where and when?</i>
Is the facility in which the equipment/software is to be located government owned or leased? Owned Leased <i>If the facility in which the equipment/software will be located is leased, what is the duration of the facility lease?</i>
<i>If the facility is leased what is the commencement date & expiration date of the lease?</i> commencement date of facility lease : _____ expiration date of facility lease: _____