PROPOSAL TO LEASE TO THE STATE OF NORTH CAROLINA

Form PO-28T

NOTE: THE STATE OF NORTH CAROLINA SHALL NOT BE RESPONSIBLE FOR ANY EXPENSES INCURRED BY THE PROPOSER IN THE PREPARATION OF THIS PROPOSAL

1a. NAME OF LESSOR: Guilford County						1b. LESSOR'S AGENT: See Attached								
2. INDICATE LESSOR'S BUSINESS CLASSIFICATION AS APPLICABLE:														
□Proprietorship							orporatio	n		⊠Govern	Government			
□Non-Profit	☐HUB)Historically Underutilize					ed Businesses					Other			
Mailing Address:	iling Address: See Attached							Phone #: See Attached						
City & ZIP See Attached							E-Mail: See Attached							
3.TOWER LOCATION: Lat	Longitude: 080-02-06.7 W													
Street Addres		City					Cour	nty	Zip:					
891 Triad Park Mainten		ernersville				Guilford				27284				
4. Attached Site Plan (to scale), showing the Height, Type, and Location of Tower														
5. ⊠Ground Lease	1			☐ Tower Space Lea								ipment Building Space		
6. Lease Type	Tower Ty	_				dg. /Fenced Area			Tower	Tower Hgt. (AGL) Leased Hgt. (AGL)				
⊠NEW	⊠Self-Suppo	orted	_]yes □no			\A/III 1.5	WILL LESSON HAVE FOLLOWERS ON				
□EXISTING	□Guyed		F			in Area only□				WILL LESSOR HAVE EQUIPMENT ON TOWER? ⊠ Yes □No				
	, , , ,				Dime	ensic	ns:							
□AMENDED	□Monopole	2			Ft.	Х	24	Ft.	IS THIS A	IS THIS A CO-LOCATION LEASE?				
		Total Bldg. or (Δrea Leas	ed.							
7 . OWNERESHIP/MAIN	led b	or Ground Area Leased: Oy: Owned												
Tower		⊠Lessor			<u> </u>			□Lessee	e ⊠Less		Lessee			
Equipment Building		Lessor		□Lessee ⊠Lessee				⊠Lessee			⊠Lessee			
Generator		Lessor		⊠Lessee							⊠Lessee			
Road		⊠Lessor		Lessee							Lessee			
Utilities		Lessor		⊠Lessee				⊠Lessee			⊠Lessee			
Other: tap here		Lessor		Lessee		Lessor		Lessee			Lessee			
·			month, or		\$		1	per term				Lessee		
9. Lease Term:	Commencement Date:													
10. Renewal Option De	tails: 2 – 10 ye	ar auto i	renewa	ls										
NOTE: RATES THAT INCLUDE INDETERMINABLE PERCENTAGE INCREASES, SUCH AS UNCAPPED CPI INCREASES ETC., ARE NOT ACCEPTABLE DURING EITHER THE INITIAL TERM OR ANY RENEWAL PERIOD(S).														
11. Additional Information:														
This proposal is made in compliance with the specifications furnished by the <u>Department of</u> <u>Administration, State Property Office</u> . I realize that the State reserves the right to reject this proposal for any reason it deems warranted.														
SEE ATTACHED DOCUMENT WHICH IS INCORPORATED INTO THE PROPOSAL														
Printed Name of Lessor/Lessor Agent and Title														
Signature of Lessor Date														
		MAI	LING	/DE	LIVE	RY	INSTRU	CTIC	ONS					
<u>Delivery Address If Delivered In Person</u> : DPS Property Manager, 3030 Hammond Business Place, Raleigh, NC <u>Mailing Address</u> : Department of Public Safety, Purchasing and Logistics Section, 4227 Mail Service Center, Raleigh, NC 27699-4200														
Rev 9/11/17 Depart	Rev 9/11/17 Department: DPS Div.: NCSHP SPO Agent: Tom Carr < thomas.carr@dos.nc.gov>													