THE STATE OF NORTH CAROLINA SHALL NOT BE RESPONSIBLE FOR ANY EXPENSES INCURRED BY THE PROPOSER IN THE PREPARATION OF THIS PROPOSAL. THE STATE RESERVES THE RIGHT TO REJECT ANY PROPOSAL FOR ANY REASON IT DEEMS WARRANTED.

## NON-ADVERTISED LEASE PROPOSAL

	PROPOSAL TO	LEASE TO 1	THE STATE OF NORT	TH CAROLINA	NON-ADVER	TISED- PO-2	8	
<ol> <li>NAME OF LESSOR:</li> </ol>		2. LESSOR'S AGENT:						
Gaston County								
INDICATE EACH LESSOR'S BUSINESS CLASSIFICATION AS APPLICABLE:A. PROPRIETORSHIPB. PARTNERSHIPC. CORPORATIOND. GOVERNMENTALE. NON-PROFITF. *** (HUB) HISTORICALLY UNDERUTILIZED BUSINESSESG.								
CORPORATIOND. GOVERNMENTALE. NON-PROFITF. *** (HUB) HISTORICALLY UNDERUTILIZED BUSINESSESG. OTHER: TAX I.D. #								
MAILING ADDRESS: P.O. Box 1578 MAILING ADDRESS								
CITY: Gastonia		CITY: ZIP:						
PHONE#: 704-866-3101		PHONE#: CELL#:						
E-MAIL: ray.maxwell@gas		E-MAIL:						
3. SPACE LOCATION:(including building name, floors involved & suite or room numbers unless entire floor)								
	a annig iz anianiig i				35 S.H.I. S.H. S.L.)			
STREET ADDRESS		CITY	COUI					
410 W. Franklin Street	TO 0041 F 011	Gastor						
<ol> <li>ATTACH FLOOR PLAN</li> <li>GROSS SQUARE FOOT</li> </ol>			A. OFFICE	B. WAREHO			OTHER	
USAGE COMPUTED	IAGE BEFORE	NE I	A. OFFICE	B. WAREHU	USE	C. '	OTHER	
6. All proposals must be submitted on the basis of net square footage as defined on reverse side of this sheet and in the								
State Specifications (form PO-27 if applicable)								
A. DESIRED PROPOSAL								
	TOTAL	A N I N I I I A I	ANNUAL		IANITOD	VA (ATER (	DECLUDED	
TYPE OF SPACE	NET SQ. FT.	ANNUAL RENTAL	RENT PER SQ. FT.	UTILITIES	JANITOR. SERVICES	WATER / SEWER	REQUIRED PARKING SPACES	
OFFICE	14,723	1.00	FER SQ. FT.	YES	YES	YES	clientele (as	
011102	11,720	1.00		. 23			available)	
WAREHOUSE							state car	
OTHER								
TOTALS	14,723	1.00	XXXX	XXXX			XXXX	
Lessor will provide employee parking spaces in above proposal at no additional charge to the State.								
Comments: (upfit if applicable – continuation on separate blank page)  Refresh paint, repair any holes in walls or sidewalks; replace HVAC air filters; wash interior/exterior windows; repair and/or replace soiled carpet,								
		idewalks; repl	lace HVAC air filters; v	vash interior/ext	terior windows;	repair and/or	replace soiled carpet,	
flooring, toilet seats etc. etc.		TING NET SO	WARE FOOTAGE WI	LL BEDUCE T	UE ANNUIAL D	CAITAL MAIT	HOUT CHANCING THE	
ERRORS BY PROPOSERS IN CALCULATING NET SQUARE FOOTAGE WILL REDUCE THE ANNUAL RENTAL WITHOUT CHANGING THE PROPOSED RATE PER SQUARE FOOT IN THE PROPOSAL (see NOTE on page #2)								
B. OPTIONAL ALTERNATI		10. 1						
B. OPTIONAL ALTERNATI			INCLUDINING UTILI	TIES AND/OR	IANITORIAL SI	ERVICES)		
	TOTAL	I	INCLODINING OTILI	UTILITIE		ORIAL		
	NET SQ.	ANNUAL	ANNUAL RENT			/ICES	WATER/SEWER	
TYPE OF SPACE	FT.	RENTAL	PER SQ. FT.	YES/NC	) YES	S/NO	YES/NO	
OFFICE	N/A							
WAREHOUSE								
OTHER TOTALS			XXXX	XXXX	XXXX			
	entele narking s	naces (				narking snace	ae	
Lessor will provide () clientele parking spaces, () employee parking spaces and () state vehicle parking spaces								
Comments:								
7. LEASE TERM: YEARS 3 BEGINNING DATE: October 1, 2024								
8. RENEWAL OPTIONS, IF ANY: TERMS AND CONDITIONS:								
NOTE: RATES THAT INCL	UDE INDETER	MINABLE PE	RCENTAGE INCREA	SES, SUCH AS	S UNCAPPED (	CPI INCREAS	SES ETC., ARE NOT	
			TERM OR ANY RENE					
The State of North Carolin								
proposed building must h	ave facilities for	or handling n	naterials to be recycl	ed such as pla	stics, aluminu	m, wastepap	per and cardboard.	
THE PROPOSED BUILDIN	G MUST BE CO	OMPLETELY	FREE OF ANY HAZA	RDOUS ASBE	STOS OR HAZ	ARDOUS LE	AD PAINT THROUGHOUT	
THE PROPOSED BUILDING MUST BE COMPLETELY FREE OF ANY HAZARDOUS ASBESTOS OR HAZARDOUS LEAD PAINT THROUGHOUT THE STATE'S TENANCY.								
Is the proposed building free of hazardous asbestos?								
			YES	YES		NO		
Is the proposed building free of hazardous lead paint?								
1 1 3 8 8 9 11 01		F	YES		NO			
DEPARTMENT: Adult Correction								
CITY: Gastonia				SQUARE FEET:14,723				
AGENT:								
DATE:								

LESSOR:								
9. ADDITIONAL INFORMATION (list any maintenance, replacements as	nd/or paint touch-up if applicable - continuation on separate blank page)							
10. Is Property To Be Leased Within An Area Designated By Fema To Be Below	e In A Flood Prone Area (100 Year, 500 Year)? If So, Please Provide Details							
44. Describing a second with least and Chate Building a of the and year								
applicable sections of the State Building Code Volumes I-V?	ing codes specifically including OSHA provisions for the handicapped and							
YES	NO PARTIALLY							
EXPLAIN IF OTHER THAN "YES" IS CHECKED ABOVE:								
12. This proposal is made in compliance with the specifications furnishe	d by Gaston County I realize that the State reserves							
the right to reject this proposal for any reason it deems warranted. This proposal is good until I ACKNOWLEDGE AND FURTHER AFFIRM THAT I am aware of and familiar with the Americans with Disabilities Act of 1990 (42 United States Code, Section 12101 et seq.) and if the above firm is awarded the contract, it will comply with the provisions of said Act.								
I am aware that annual per square foot rental rate(s) which include indeterminable percentage increase(s) such as uncapped Consumer Price Index increases etc., are not acceptable during either the initial term or any renewal period(s):								
(HUB) HISTORICALLY UNDERUTILIZED BUSINESSES (HUB) CONSIST OF MINORITY, WOMEN AND DISABLED BUSINESS FIRMS THAT ARE AT LEAST FIFTY-ONE PERCENT OWNED AND OPERATED BY AN INDIVIDUAL(S) OF THE AFOREMENTIONED CATEGORIES. ALSO INCLUDED IN THIS CATEGORY ARE DISABLED BUSINESS ENTERPRISES AND NON-PROFIT WORK CENTERS FOR THE BLIND AND SEVERELY DISABLED.								
N.C.G.S. § 133-32 and Executive Order 24 prohibit the offer to, or acceptance by, any State Employee of any gift from anyone with a contract with the State, or from any person seeking to do business with the State. By execution of this proposal, you attest, for your entire organization and its employees or agents, that you are not aware that any such gift has been offered, accepted, or promised by any employees of your organization.								
Ray Maxwell, PE Printed Name of Lessor								
Signature of Lessor Date								
ELECTRONIC DELIVERY INSTRUCTIONS								
NON-ADVERTISED PROPOSAL:								
Questions should be directed to your NC agency contact or to NC State Property Office at: 984-236-0270								
	occupancy by State Personnel and/or equipment. To determine net square							
footage:  1. Compute the inside area of the space by measuring from the normal inside finish of exterior walls or the roomside finish of fixed corridor and shaft walls, or the center of tenant separating partitions.  2. Deduct from the Inside area the following:  *a. Toilets and lounges  *b. Entrance and elevator lobbies  *c. Corridors  d. Stairwells								
e. Elevators and escalator shafts f. Building equipment and service areas g. Stacks, shafts, and interior columns								
h. Other space not usable for State purposes  *Deduct if space is not for exclusive use by the State. Multiple State leases require a, b, and c to be deducted. The State Property Office may make								
adjustments for areas deemed excessive for State use.	DIVIDION							
DEPARTMENT: Adult Correction	DIVISION: 4							
CITY: Gastonia	SQUARE FEET: 14,723 AGENT:							
DATE:								
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