

Site Selection Checklist

Today's Date:	Enter date		
Franchisee Info:			
Name:	First name and last name		
Address:	Street address		
Phone:	Phone number		
E-mail:	Email address		
Real Estate Broker:			
Name:	First name and last name		
Address:	Street address		
Phone:	Phone number		
E-mail:	Email address		
Landlord:			
Name:	First name and last name		
Address:	Street address		
Phone:	Phone number		
E-mail:	Email address		
Site Data:			
Site Name:	Site name		
Center Name:	Center name		
Address:	Street address		
Intersection:	Enter intersection		
Type of Site: <i>(select all that apply)</i>			
<input type="checkbox"/>	CBD (Central Business District)		
<input type="checkbox"/>	Suburban		
<input type="checkbox"/>	In-Line		
<input type="checkbox"/>	Anchored		
<input type="checkbox"/>	Other - Click here to enter text		
Site Evaluation:			
Size:	Enter TOTAL Sq Footage		
Dimensions:	Enter WIDTH X LENGTH		
Rent/Sq Ft:	Rent per Sq Foot		
Annual Rent (Base):	Annual Rent		
CAM/Tax per Sq Ft:	CAM and Tax per Sq Foot		
Annual CAM:	Annual CAM		
Annual NNN (Total):	Annual NNN		
Initial Term of Lease Years:	Term of Lease (Years)		
Renewal Option(s):	Renewal Options		
Total Lease Liability:	Liability		
Estimated Possession Date:	Estimated Possession Date		
Estimated Open Date:	Estimated Open Date		
Condition of Space:	What is condition of space		
Building Age:	Age	Space use:	
Impact Fees	Estimated Possession Date		
Signage:			
Building:	Front: <input type="checkbox"/> Back: <input type="checkbox"/> Side: <input type="checkbox"/>		
Pylon/Monument:	Yes <input type="checkbox"/> No <input type="checkbox"/>		

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Signage Visibility:		
	(Rank quality 1-5)	Visible Distance
North		
South		
East		
West		
Access:		
	(Rank quality 1-5)	
From Anchor:		
Ingress Street:		
Egress Street:		
Street Light (left in/left out):	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Multiple Entrances:	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Parking:		
Number of spaces:		
Spaces per sq ft:		
Traffic Counts: (in tens of thousands)		
Primary Road:		
Secondary Road:		
Directional:		
Other Tenants:		
Anchor:	Click here to enter text	
Adjoining Tenant:	Click here to enter text	
Adjoining Tenant:	Click here to enter text	
Co-Tenant:	Click here to enter text	
Co-Tenant:	Click here to enter text	
Co-Tenant:	Click here to enter text	
Zoning:		
<i>(Typically will require a visit with governing agency's / city office)</i>		
Zoned (provide zoning code):	Click here to enter text	
Approved use:	Click here to enter text	
Change of use required (Y/N)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Special Use or Conditional Use Required (Y/N)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Zoning Verification Letter Available (Y/N)	Yes <input type="checkbox"/> No <input type="checkbox"/>	
Zoning Verification Letter Fee		
Click here to enter text		

Site Package Checklist: <i>(all items must be submitted with Site Pack)</i>	
<input type="checkbox"/>	Pictures
<input type="checkbox"/>	As Built Drawings
<input type="checkbox"/>	Proximity Map
<input type="checkbox"/>	Brochure PDF
<input type="checkbox"/>	Site Plan of Center PDF
<input type="checkbox"/>	Aerial PDF
<input type="checkbox"/>	
<input type="checkbox"/>	