

COMMERCIAL LEASE SPEC SHEET

1. PARTIES TO THE LEASE

Lessor (Landlord/entity owning the premises):

Name of Lessor: Clay County

Lessor's Entity Type and State of Formation (e.g. individual; Texas corporation, LLC, LP, etc.):
Local jurisdiction - County of Texas

Contact Person's Name and Title: County Judge Mike Campbell

Mailing Address: 214 North Main Street Henrietta, Texas 76365

Physical Address: 214 North Main Street Henrietta, Texas 76365

Phone Number: 940-538-4651

Fax Number: _____

Email Address: mike.campbell@co.clay.tx.us

Lessee (Tenant/entity leasing the premises from Landlord/Owner):

Name of Lessee: TDEM

Lessee's Entity Type and State of Formation (e.g. individual; Texas corporation, LLC, LP, etc.):
State Agency

Contact Person's Name and Title: Sandra Fulenwider, Division Chief, Facilities

Mailing Address: P O Box 15467, Austin TX, 78761

Physical Address: 1033 La Posada Dr, Suite 374, Austin, TX 78752

Phone Number: 512-424-2102

Fax Number: N/A

Email Address: sandra.fulenwider@tdem.texas.gov

2. PREMISES DESCRIPTION

Name of Building (if any): Clay County Public Safety Building

Address of Building: 210 North Bridge Street Henrietta, TX 76365

Location of space being leased in Building (i.e. floor, suite # or area – e.g. northwest corner):
Ground floor - 1 Office

Total square footage being leased (do not include “common areas” e.g. hallways or restrooms):
222 sq. ft.

Any common areas included in lease? If not, is usage of common areas allowed?
No. Usage of common areas are allowed.

What is the intended use? Is lease space use restricted?
Office space for public safety and county office needs. Non restricted.

Any modifications, improvements or renovations necessary before occupying the lease space? If yes, please describe: Office space is currently under renovation and may be moved or modified.

Any parking spots needed? Yes No

If yes, please list number of spaces, type (i.e. reserved, unreserved), and any additional charges:
1 parking spot

3. TERM

Length of lease (months or years): _____

Commencement date and expiration date: _____

Any renewal period or option? If yes, how long? _____

4. RENTAL PAYMENTS

Rent amount? 0.00

Monthly or yearly? N/A

Remittance address: N/A

Rent escalation during term? If yes, describe: No.

Any security deposit? If yes, how much? No.

5. SERVICES

Utilities (list who is paying for what and any special requirements e.g. # of phone lines, etc.):
TDEM will furnish its own internet, and office phone. Electricity & HVAC provided by County

Security (describe building security, if any, and if there will be additional charges associated with security devices e.g. access cards, etc.):

Janitorial (describe what services are provided, how often and if there is an additional charge):
Janitorial services are provided by the County

Maintenance: Maintenance is provided by County

6. NOTICES

Notices (provide contact information for notices if different than information in Section 1):

7. EXHIBITS

Provide a copy of the floor plan showing the space to be leased along with any additional exhibits that will need to be attached to the lease.

Name of person completing this form: Judge Mike Campbell

Phone #/contact information: 940-538-4651

Email: mike.campbell@co.clay.tx.us