

1. What are the designated market areas in which you currently operate?

2. How Many Stores Exist?

3. What was your total gross sales for last year?

4. What is your target gross monthly rent for your new location?

5. What is the established radius of an individual store's trading area?

6. What is the typical demographic profile of your store?

Population Density: _____ Race/Gender: _____

Household Income: _____ Age: _____

7. Does your store need to be in close proximity to other retailers, strip centers, power centers or regional malls?

Yes If yes, please explain: _____

No _____

8. Is exposure important?

Yes If yes, what type of exposure is standard (freeway, highway, main

No arterial road) _____

9. In which do your stores primarily operate?

Strip Ctr. Regional Malls Stand Alone Buildings Neighborhood Ctr.

If Shopping Center, do you prefer anchored Centers? Yes No

If yes, what anchors do you prefer? _____

Which tenants do you dislike being near or adjacent too? _____

Do you prefer in line, corner spaces, or out parcels? _____

10. Typical Lease Term

Describe: _____

Option Term: _____

11. Would you consider a build-to-suit?

Yes No _____

12. Square Footage

What are the maximum and minimum square footage's? _____

13. Linear Footage

What are the maximum and minimum width and depth of your spaces? _____

14. Space Configuration

Does your space requirement require a specific configuration...(restrooms, offices, loading, showroom, etc.)? Yes No _____

Primary: _____

Secondary: _____

Do you have a template of an ideal floor plan or layout?

(If yes please attach to questionnaire) Yes No

15. Do you have a perfect or template location and/or store?

Yes No

If yes, where is it and why? _____

Do you have exterior or interior photos? Yes No

If yes please attach to questionnaire

16. Interior Look:

List quantitative (image) information such as spacious, conservative, avante-garde, etc.

Special lighting (for showroom, warehouse) _____

Special finishes; i.e. custom carpet, fabric wall covering, custom paint, acoustical wall treatments, etc. _____

17. Entry/Reception Area/Department

Does your retail space require a customer service area? Yes No

If yes, seating for how many? _____

Any special equipment outlets for this area? _____

18. Ceilings

What type of ceiling is required, if any? (i.e. standard ceiling tile, high acoustical value ceiling tile, foil with acoustical batt-insulation, ceiling grid only, exposed joist, etc.)

Is there a minimum ceiling height required in any area? Yes No

Area: _____ Height: _____

19. What type of flooring is required? (i.e. sealed concrete, VCT, anti-static, other)

20. Counter/Work benches

What type of counter material, if any, is required? (acid resistant, etc.) _____

Are electrical plug strips required? Yes No

If yes, how many and where should they be located? _____

Isolated ground, separate circuit, etc.? _____

Spacing of plugs, i.e. 12" o.c.? _____

Comments: _____

21. Heating, Ventilation and Air Conditioning

Standard Air Conditioning and Heating Requirements? Yes No

Air Conditioning: Cool To: _____ Heat to: _____

What type of HVAC system do you utilize? _____

22. How Much is the typical build out beyond the typical Vanilla Shell delivery?

What is being constructed above and beyond Vanilla Shell? _____

23. Warehouse Storage/Supply Area(s)

Does your space require a separate storage/supply room or warehouse area?

Yes No Comments: _____

Does storage/supply room need to be locked? Yes No

Type of locks: Standard Cipher

Card Key Access Other

If locked, who has access? _____

Describe: _____

If your space requires any special storage requirements other than the previously mentioned, please describe: _____

24. Conference Rooms

Does your space require the use of a Conference Room, Salesman Offices, Lunch Room, or special rooms? Yes No

List Room(s): _____

25. Lunch Rooms

Are lunch rooms required within your space? Yes No

If so, list desired size and location: _____

If so, are sinks, garbage disposals, hot water, storage cabinets, vending machines, water cooler, refrigerator, copiers, fans or other items required? _____

26. Computer/Equipment Rooms

Does your space require a Computer and/or Equipment Room: Yes No

If so, list desired size and location: _____

Does any of the equipment and/or personnel need to be enclosed in a separate room within the Computer Room? Yes No

Explain: _____

Does any of the equipment have special requirements, such as 24-Hour air conditioning, raised floor, special fire suppression (halon) or an uninterrupted power source?

Yes No

Explain: _____

Type of lock (if required): Standard Cipher
 Card Key Access Other

If locked, who has access? _____

Describe: _____

Will vision glasses be required? Yes No

Do you have a floor plan indicating the present layout? Yes No

If not, please describe the layout of the equipment: _____

27. Other Equipment/Machinery

Does your space require any freestanding equipment such as: copiers, facsimile, microfiche, printers, P.C's, mail equipment, etc.? Yes No

Please indicate the circulation required around each piece of machinery, if critical:

Type/Mfg.	Front	Right	Left	Back	Height

Comments (Dedicated Circuit, Separate Circuit, Isolated Ground): _____

Does any of the equipment need to be enclosed in a separate room?

Yes No

Explain: _____

Does any equipment have any special requirements, such as 24-hour air conditioning, raised floor, special fire suppression (halon) or an uninterrupted power source?

Yes No

Explain: _____

Does any equipment need sound control panels around it or vibration isolation dampers under it? Yes No

Explain: _____

Do you have a floor plan indicating the present layout of equipment and/or machinery?

Yes No

Explain: _____

Is there a more efficient layout? Yes No

Explain: _____

28. Lockers/Changing Rooms

Does your space require showers, lockers, etc.? Yes No

If so, please list fixtures, items, and the quantities required: _____

29. Shipping/Receiving

Do you have a shipping/receiving areas? Yes No

If so, what are the sizes of the shipping/receiving areas?

Shipping: _____ Adjacency: _____

Receiving: _____ Adjacency: _____

Staging Area (if separate from Shipping Area): _____

What are the hours of operation: _____

Is any ventilation required? Yes No

If so, please explain: _____

List the equipment in each area: mail machines, packing equipment, conveyors, etc.

Shipping: _____

Receiving: _____

Does the shipping/receiving areas require more space on a seasonal basis only?

Yes No

If so, please explain: _____

What type of loading dock is required?

Ground level dock Truck Well Main Door Only None

List size(s) of overhead door(s): _____

List all special items: back-up alarms or lights, bumpers, electric dock doors, wall bumpers, guard posts, etc.: _____

Maximum size and number of trucks at one time and percentage of slope at well:

Does your store use a forklift? Yes No

Turn around and minimum aisle space required: _____

Are guard posts required? Yes No

Is forklift electric? Yes No

Does your store require either a caged or secured area? Yes No

If so, please describe: _____

30. If your store has racks, shelving, pallets, etc., please list and describe

Type	Length	Width	Height	Location

Do the racks have in-line sprinklers? Yes No

Do the racks have seismic bracing to a wall and to each other? Yes No

If so, please describe: _____

31. Franchisors Only

How many corporate locations? _____ How many franchised locations? _____

Please list all locations: _____

what is the minimum net worth of a franchisee? _____

How much does a typical franchisee finance? _____

How much is the franchise license to purchase? _____

How much does the typical franchisee deposit? _____

What is refundable and under what circumstances? _____

Does the franchisor want to be included in the tour of sites? _____

What is the approval process of a store by corporate? _____

